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ABSTRACT

The results of a five-step curriculum analysis of the registered nursing program at Fresno City College, California, are provided in this booklet. (An analysis of four other vocational programs are provided in CE 019 817-820.) The products of step 1 include a definition of the employment opportunity for this area and a statement of the skills/behaviors/attitudes required for employment; program curriculum objective defined specific to the stated employment requirements; performance requirements for the stated program curriculum objective; curriculum objectives of all existing vocational/occupational courses presently required for graduation from this program area; and a definition of the terminal mastery (cognitive/affective/psychomotor) which students must achieve from each non-occupational/vocational course included in the program. Step 2 includes a cognitive/affective/psychomotor analysis of each stated course objective and the criteria of mastery for each item identified. Step 3 includes an identification of items of mastery required in each course which represent problem areas for the disadvantaged student; and diagnosis/identification of the nature of the problem areas and their perceived causes in terms of student-related and curriculum/course-related courses. Step 4 includes a restatement of the priority problem area as terminal performance objectives, criterion measures for each terminal performance objective, learning requirements to achieve each objective, an organization of learning stress, and an analysis of alternate methods and media. Finally, step 5 includes specific recommendations of program/course change to eliminate identified problems and produce the required mastery. (JH)

ED166461

"Project: MOBILITY"

A Federally Funded Research & Design Project
for
Disadvantaged and Handicapped Vocational Education Students
(Grant #G007603888)

THE FOLLOWING IS A CURRICULUM ANALYSIS
COMPLETED TO
IDENTIFY AND ELIMINATE HURDLES TO STUDENT SUCCESS IN

Registered Nursing

Curriculum Analysis

Curriculum Committee:

Ms. Rose Howell, R.N. - Chairperson
Mr. William Day
Ms. Betty Gadbois, R.N.
Ms. Celia Gomez
Mr. Kehinde Solwazi

Committee Consultant:

Mr. Ward L. Corrigan

Project Director:

Mr. Richard Handley
Associate Dean of Instruction
for Occupational Education

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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June, 1978

Fresno City College..1101 E. University Ave...Fresno, CA - 93741..(209) 442-4600

CE 019 820

RESEARCH AND DESIGN PROJECT
CURRICULUM ANALYSIS

REGISTERED NURSING

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RESEARCH AND DESIGN PROJECT

CURRICULUM ANALYSIS

INTRODUCTION

The largest task undertaken in completing Phase II of this project was the thorough curriculum assessment of the five vocational education programs focused on by this project (Automotive Mechanics, Electronics, Licensed Vocational Nursing, Registered Nursing and Office Occupations). This analysis sought to identify the specific hurdles which were preventing student success; and then to determine what specific instructional methods/media changes would have to be made to eliminate them.

Each team worked to translate their curriculum from a norm referenced to a criterion referenced basis. Employment requirements replaced textbook tables of content as the basis of determining what should be mastered. Individual mastery replaced class standing as the standard of success or failure; and the methods and media of instruction were reassessed to determine if they were most appropriate, given the unique needs of the target students and the characteristics of the skills/knowledges/attitudes to be mastered.

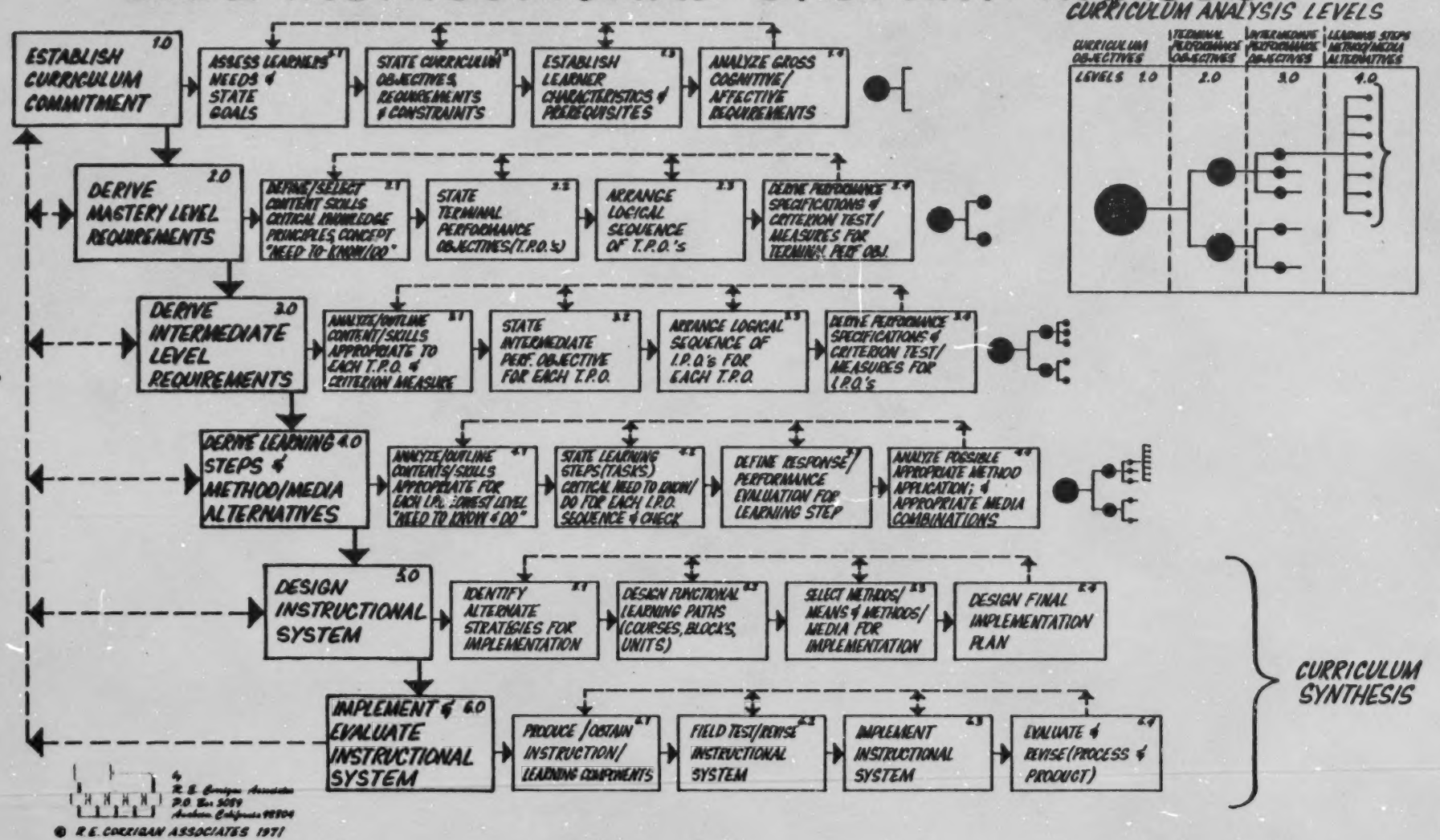
The process used by each team was a highly systematic one. It sought to eliminate assumption and to standardize the curriculum analysis steps being applied by each of the five instructional design teams. All teams applied the same steps, in the same sequence, and against the same standards of completion. As much as possible, the process remained a constant. It was only the content/skills/behavior being analyzed that differed from team to team. The model of curriculum analysis that was employed can be found on page 3. All team members

were trained in its application. In addition, a consultant from the developers of the model worked with each design team as they applied it to their vocational education program.

There were five general steps applied by each team. A listing of those steps can be found on pages 5 and 6. This booklet has been sectioned and bound according to those five steps. At the beginning of each section, you will be provided with a general overview of what the team did at that step. You will then be given a listing of the analysis functions performed by the team at that step. For steps 3 and 4, you will also be provided with the detailed instructions given to the team and copies of the forms they used. The curriculum analysis products developed by the team will then be provided in the sequence in which they were developed.

We hope that our effort will be of value and that the following analysis will help eliminate the hurdles which are keeping disadvantaged and/or handicapped vocational education students from successfully acquiring the skills, knowledges and attitudes they require to enter the job market place and; as a minimum, achieve their independent survival point.

SAFE INSTRUCTIONAL SYSTEM MODEL


1.0 ESTABLISH CURRICULUM COMMITMENT
1.1 ASSESS LEARNERS NEEDS & STATE GOALS
1.2 STATE CURRICULUM OBJECTIVES, REQUIREMENTS & CONSTRAINTS
1.3 ESTABLISH LEARNER CHARACTERISTICS & PREREQUISITES
1.4 ANALYZE GROSS COGNITIVE/ AFFECTIVE REQUIREMENTS
2.0 DERIVE MASTERY LEVEL REQUIREMENTS
2.1 DEFINE/SELECT CONTENT SKILLS CRITICAL KNOWLEDGE PRINCIPLES, CONCEPT "NEED TO KNOW/DO"
2.2 STATE TERMINAL PERFORMANCE OBJECTIVES (T.P.O.'s)
2.3 ARRANGE LOGICAL SEQUENCE OF T.P.O.'s
2.4 DEFINE PERFORMANCE SPECIFICATIONS & CRITERION TEST/ MEASURES FOR TERMINAL PERF. OBJ.
3.0 DERIVE INTERMEDIATE LEVEL REQUIREMENTS
3.1 ANALYZE/OUTLINE CONTENT/SKILLS APPROPRIATE TO EACH T.P.O. & CRITERION MEASURE
3.2 STATE INTERMEDIATE PERF. OBJECTIVE FOR EACH T.P.O.
3.3 ARRANGE LOGICAL SEQUENCE OF I.P.O.'s FOR EACH T.P.O.
3.4 DEFINE PERFORMANCE SPECIFICATIONS & CRITERION TEST/ MEASURES FOR I.P.O.'s
4.0 DERIVE LEARNING STEPS & METHOD/MEDIA ALTERNATIVES
4.1 ANALYZE/OUTLINE CONTENTS/SKILLS APPROPRIATE FOR EACH I.P.O. LOWEST LEVEL "NEED TO KNOW & DO"
4.2 STATE LEARNING STEPS (TASKS) CRITICAL NEED TO KNOW/ DO FOR EACH I.P.O. SEQUENCE & CHECK
4.3 DEFINE RESPONSE/ PERFORMANCE EVALUATION FOR LEARNING STEP
4.4 ANALYZE POSSIBLE APPROPRIATE METHOD APPLICATION; & APPROPRIATE MEDIA COMBINATIONS
5.0 DESIGN INSTRUCTIONAL SYSTEM
5.1 IDENTIFY ALTERNATE STRATEGIES FOR IMPLEMENTATION
5.2 DESIGN FUNCTIONAL LEARNING PATHS (COURSES, BLOCKS, UNITS)
5.3 SELECT METHODS/ MEANS & METHODS/ MEDIA FOR IMPLEMENTATION
5.4 DESIGN FINAL IMPLEMENTATION PLAN
6.0 IMPLEMENT & EVALUATE INSTRUCTIONAL SYSTEM
6.1 PRODUCE /OBTAIN INSTRUCTION/ LEARNING COMPONENTS
6.2 FIELD TEST/REVISE INSTRUCTIONAL SYSTEM
6.3 IMPLEMENT INSTRUCTIONAL SYSTEM
6.4 EVALUATE & REVISE (PROCESS & PRODUCT)
CURRICULUM ANALYSIS LEVELS
CURRICULUM OBJECTIVES
TERMINAL PERFORMANCE OBJECTIVES
INTERMEDIATE PERFORMANCE OBJECTIVES
LEARNING STEPS METHOD/MEDIA ALTERNATIVES
LEVELS 1.0 2.0 3.0 4.0
CURRICULUM SYNTHESIS

R. E. Corrigan Associates
P.O. Box 5069
Anaheim, California 92804

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RESEARCH AND DESIGN PROJECT

SPECIFIC WORK ASSIGNMENTS TO BE COMPLETED BY EACH CURRICULUM DESIGN TEAM.

The following five steps will constitute the total scope of work to be completed during Phase II of the project. Establish your own work schedules and meeting times. All work is to be completed by December 16, 1977.

STEP 1

a) Derive Employment Requirements - a definition of the employment opportunity and a statement of the Skills/Behaviors/Attitudes required for employment.

b) Define your Program Curriculum Objective specific to the stated Employment Requirements - focus on required final mastery.

c) Derive Performance Requirements for the stated Program Curriculum Objective. These represent statements of all operating limitations, conditions or givens affecting the implementation or content of the Program Curriculum Objective.

d) Translate all existing courses presently required for graduation from your program area into curriculum objectives (vocational/occupational courses only).

e) Define the terminal mastery (Cognitive/Affective/Psychomotor) which students must achieve from each non-occupational/vocational course included in your program.

STEP 2

a) Perform a Cognitive/Affective/Psychomotor Analysis of each stated course objective to derive ALL highest levels of mastery required for successful completion of the course.

b) State the criteria of mastery for each item identified in the Cognitive/Affective/Psychomotor Analysis. These statements would include the method of evaluation and the level of performance required of the student (How and How Well). This statement is not the exact test item that the student would encounter (Criterion Measure).

c) Assess each course to confirm that the sequencing of the items of mastery is correct according to the taxonomies; and that the combined courses will produce the mastery demanded by the Employment Requirements and the Program Curriculum Objective (vocational/occupational courses only).

STEP 3

a) Identify those items of mastery required in each course which represent problem areas for the disadvantaged student; i.e., required proficiency levels

not being attained.

b) Diagnose/Identify the nature of the problem areas and their perceived causes for performance deficiencies in terms of 1) student related and 2) curriculum/course related causes.

c) Prioritize the identified problem areas according to their criticality for continuing success by the disadvantaged student.

STEP 4

a) Restate the priority problem areas as Terminal Performance Objectives.

b) Derive Criterion Measures for each Terminal Performance Objective.

c) Analyze the Learning Requirements to Achieve each Objective.

d) Organize the learning steps.

e) Analyze alternate Methods and Media.

STEP 5

a) Define specific recommendations of program/course change to eliminate the identified problems and produce the required mastery.

RESEARCH AND DESIGN

PROJECT: MOBILITY

STEPS OF CURRICULUM ANALYSIS

STEP 1

AS THEIR FIRST STEP, THE DESIGN TEAM SEEKS OUT THE EMPLOYER'S STATEMENT OF SKILLS/KNOWLEDGES/ATTITUDES REQUIRED FOR EMPLOYMENT. THE COLLEGE'S VOCATIONAL PROGRAM AND ITS COURSES ARE THEN TRANSLATED INTO MEASURABLE PERFORMANCE OBJECTIVES.

THIS STEP CLEARLY DEFINES THE SKILLS/KNOWLEDGES AND ATTITUDES REQUIRED FOR EMPLOYMENT WHICH WILL BE THE ULTIMATE REFERENT FOR THE ENTIRE PROJECT. IT ALSO TRANSLATES THE COLLEGE'S VOCATIONAL EDUCATION PROGRAMS INTO MORE PRECISE STATEMENTS OF REQUIRED FINAL MASTERY. THIS FINAL MASTERY WILL BE THE TARGET OF ALL UPCOMING CURRICULUM ANALYSIS STEPS.

STEP 1:

A) DERIVE EMPLOYMENT REQUIREMENTS - A DEFINITION OF THE EMPLOYMENT OPPORTUNITY AND A STATEMENT OF THE SKILLS/BEHAVIORS/ATTITUDES REQUIRED FOR EMPLOYMENT.

B) DEFINE YOUR PROGRAM CURRICULUM OBJECTIVE SPECIFIC TO THE STATED EMPLOYMENT REQUIREMENTS - FOCUS ON REQUIRED FINAL MASTERY.

C) DERIVE PERFORMANCE REQUIREMENTS FOR THE STATED PROGRAM CURRICULUM OBJECTIVE. THESE REPRESENT STATEMENTS OF ALL OPERATING LIMITATIONS, CONDITIONS OR GIVEN AFFECTING THE IMPLEMENTATION OR CONTENT OF THE PROGRAM CURRICULUM OBJECTIVE.

D) TRANSLATE ALL EXISTING COURSES PRESENTLY REQUIRED FOR GRADUATION FROM YOUR PROGRAM AREA INTO CURRICULUM OBJECTIVES (VOCATIONAL/OCCUPATIONAL COURSES ONLY).

E) DEFINE THE TERMINAL MASTERY (COGNITIVE/AFFECTIVE/PSYCHOMOTOR) WHICH STUDENTS MUST ACHIEVE FROM EACH NON-OCCUPATIONAL/VOCATIONAL COURSE INCLUDED IN YOUR PROGRAM.

JOB DESCRIPTION - NURSING SERVICE DEPARTMENT
STAFF NURSE

1. JOB SUMMARY:

Renders nursing care and related assistance to hospitalized patients assigned to medical and surgical services, and assists in supervising auxiliary personnel. Promotes and maintains harmonious relationships between nursing staff and other departments of the hospital. Is alert and skillful in recognizing and identifying symptoms. Directs assignments and activities of non-professional workers. Engages in research related to improvement in nursing care.

II. JOB RELATIONSHIPS:

A. Responsible to: The Staff Nurse reports to the Supervisor.

B. Workers Supervised: Non-professional nursing personnel on the unit.

C. Interrelationships: The Staff Nurse must work closely with the nursing personnel, medical staff, and other employees of the hospital; of course, the patient and the public.

III. RESPONSIBILITIES AND AUTHORITIES:

A. Performs any combination or all of the following duties in rendering nursing care to hospitalized patients:

1. Administers medications, dressings, special treatments, exercises and other nursing services, as prescribed.
2. Renders assistance to physicians.
3. Observes and records temperature, pulse, respiration, blood pressure, intake and output, and general physical and mental state on patient record.
4. Prepares patient for operation by administering prep, medication, enema, catheterization, obtaining specimens of body fluids for laboratory analysis.
5. Arranges for transportation of patient.
6. Receives patients of the surgery. Constantly observes post-operative condition.
7. Admits and discharges patients. Receives physician's orders. Carries them out appropriately. Keeps Kardex file current as well as Nursing Care Plans.
8. Positions patient so as to prevent pressure areas. Facilitates comfort of patient using pillows, back rests and other special aids. Assists physician in adjusting special appliances and apparatus as required.
9. Isolates patients, if necessary, and observes strict medical asepsis to prevent any spread, insuring compliance of asepsis by other staff members and visitors; explaining such procedure to the patient.
10. Cooperates with family and patient in planning for home care, teaches patients special treatments and administration of medications, and acceptance of limitations imposed by illness or disability.
11. Initiates judgment in selecting proper treatment for unusual or unfavorable indications.

12. Aids the physician in the care of the patient in the Emergency Room. Is resourceful.
13. Responsible for knowledge of the patient's condition at all times. Providing nursing care according to physician's instructions and in conformance with recognized nursing techniques and procedures, established standards and administrative policies.
14. Assists with or institutes remedial measures for adverse developments.
15. Maintains accurate and complete records.
16. Is responsible for the orderliness and cleanliness of the area.
17. Cooperates with Nurse Supervisor. Listens to and gives report to other nurses.
18. Performs other duties in rendering patient care and related nursing services.

IV. QUALIFICATIONS:

A. Graduation from an accredited school of nursing. Current registration with State Board of Nurse Examiners; advanced preparation in medical or surgical nursing is preferred.

B. Training and Experience: At least two years of recent acute hospital experience is desirable. In-service training is provided.

C. Job Knowledge: Good knowledge of general nursing theory and practice, including those basic knowledge related to nursing, such as biological, physical, social, and medical sciences, and their application, for a better understanding of patient-care problems. Thorough knowledge of techniques and methods peculiar to medical, surgical and orthopedic nursing, and principles and methods involved in performing general nursing services and in adapting or modifying standard practices for care of hospitalized patients. Familiarity with organization and function of all departments and policies, regulations and procedures of hospital as related to Nursing Service. Knowledge of literature and new developments in nursing field with emphasis on medical, surgical and orthopedic nursing. Acquaintance with the demands of nursing and health fields outside and inside the hospital.

AGREED TO

EMPLOYEE

DEPARTMENT HEAD

APPROVAL

ADMINISTRATOR

DATE

Sierra Hospital Foundation

EMPLOYEE PERFORMANCE REPORT

NAME OF EMPLOYEE _____ DEPARTMENT _____

JOB TITLE AND CLASSIFICATION _____

You are encouraged to use spaces marked Comment to explain your rating for each factor and spaces marked Goals to record specific, mutually agreed upon modifications or improvements. Check the box which most closely describes this employee's performance.	U	I	M	E	O
1. *Quality of Work.* Consider neatness, accuracy, and degree of excellence. Comment _____ Goals _____					
2. *Quantity of Work.* Consider amount of work produced. Comment _____ Goals _____					
3. *Attitude.* Consider ability to get along with, and affect on others, willingness to cooperate with supervisors and to conform to rules of work. Interest in self improvement. Comment _____ Goals _____					
4. *Attendance.* Consider absenteeism and tardiness. Comment _____ Goals _____					
5. *Knowledge of Work.* Consider how well the employee knows the elements, and technical requirements of his job. Comments _____ Goals _____					
6. *Reliability.* Consider employee's conscientiousness in carrying out duties. Comments _____ Goals _____					
7. *Personal Appearance.* Consider appropriateness of attire, claenliness, neatness and general grooming. Comments _____ Goals _____					
8. *Physical Fitness.* Consider health and physical ability to perform requirements. of the job. Comments _____ Goals _____					

U - Performance Unsatisfactory
I - Improvement needed for performance to meet expected standards
M - Performance meets expected standards
E - Performance exceeds expected standards
O - Performance is outstanding

Check the box which most closely describes this employee's performance.	U	I	M	E	O
9. *Care of Equipment.* Consider use and treatment of equipment, supplies and facilities. Comment ..... Goals					
10. *Adaptability.* Consider ability to adjust to changing situations and work assignments. ..... Goals					
11. *Initiative.* Consider willingness to assume responsibility and ability to do so effectively. Comment ..... Goals					
12. *Judgement.* Consider ability to evaluate work circumstances and make appropriate decisions. Comment ..... Goals					
13. *Planning.* Consider ability to program beyond immediate needs and ability to coordinate activities with other persons and/or departments. Comment ..... Goals					
14. *Supervisory Ability.* Consider ability to teach, direct and constructively influence performance and opinions of others. Comment ..... Goals					

U - Performance Unsatisfactory
I - Improvement needed for performance to meet expected standards
M - Performance meets expected standards
E - Performance exceeds expected standards
O - Performance is outstanding

ADDITIONAL PERFORMANCE GOALS AND COMMENTS:

This evaluation was discussed with me. *Employee's Signature* _____

Rater's Signature _____

ON THE FOLLOWING PAGES, YOU ARE PROVIDED WITH AN ANALYSIS OF THE ENTRY-LEVEL SKILLS/KNOWLEDGES/ATTITUDES REQUIRED TO SUCCEED IN THIS OCCUPATIONAL AREA. THE INFORMATION IS TAKEN FROM THE DICTIONARY OF OCCUPATIONAL TITLES, D.O.T., COMPILED BY THE DEPARTMENT OF LABOR.

THIS ANALYSIS IS ONE OF SEVERAL SOURCES USED BY THE PROJECT DURING PHASE II TO DEFINE THE LEVELS AT WHICH A STUDENT WOULD HAVE TO BE ABLE TO PERFORM IN ORDER TO ENTER AND SUCCEED IN THIS PROGRAM. THESE LEVELS FURTHER SERVED TO HELP PUT LIMITS ON REMEDIAL PROGRAMS DESIGNED TO BRING A STUDENT UP TO ENTRY-LEVEL STANDARDS.

RESEARCH DESIGN PROJECT FOR DISADVANTAGED STUDENTS DOT INFORMATION SHEET

OCCUPATIONAL EDUCATION
NOV 15 1977

VOCATIONAL PROGRAM: Nursing

WORKER TRAIT NUMBER THIS VOCATIONAL CLUSTER: .378

JOBS WITHIN THIS VOCATIONAL CLUSTER:

Job	DOT Number
Registered Nurse	075.378
Licensed Vocational Nurse	075.378

BREAK-DOWN OF VOCATIONAL CLUSTER WORKER TRAIT INFORMATION:

A. CLUSTER: Nursing

B. JOB: Reg. Nurse & Lic. Voc. Nurse DOT NUMBER 075.378

C. WORKER TRAITS RELATED TO DATA, PEOPLE, THINGS:

A. Compiling
B. Serving
C. No Significant Relationship

D. GENERAL EDUCATIONAL DEVELOPED REQUIRED:

1. Reasoning Development -- Level 4 - Apply principles of rational systems to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Interpret a variety of instructions furnished in written, oral, diagrammatic, or schedule form.

D.GENERAL EDUCATIONAL DEVELOPMENT REQUIRED Con't.

2. Matematical Development, Level 4 - Perform ordinary arithmetic, algebraic, and geometric procedures in standard, practical applications.

3. Language Developmemt, Level 4 - Comprehension and expression of a level to: Transcribe dictation, make appointments for executive and handle his personal mail, interview and screen people wishing to speak to him, and write routine correspondence on own initiative. - Interview job applicants to determine work best suited for their abilities and experience, and contact employers to interest them in services of agency. - Interpret technical manuals as well as drawings and specifications, such as layouts, blue prints, and schematics.
Comprehension and expression of a level to: File, post, and mail such material as forms, checks, receipts,and bills. Copy data from one record to another, fill in report forms, and type all work from rough draft or corrected copy. - Interview members (2 b)

E. APTITUDES; Specific capabilities and abilities required in order to learn or perform adequately a job duty.

Aptitude	Level	Explanation
G	3	INTELLIGENCE: General Learning Ability. The ability to "catch on" or understand instructions and underlying principles. Ability to reason and make judgments. Closely related to doing well in school. (3) The middle third of the population possesses a medium degree of the aptitude, ranging from slightly below to slightly above average.
V	3	VERBAL: Ability to understand meanings of words and ideas associated with them, and to use them effectively. To comprehend language, to understand relationships between words, and to understand meanings of whole sentences and paragraphs. To present information or ideas clearly. (3) See above.

K	3	MOTOR COORDINATION: Ability to coordinate eyes and hands or fingers rapidly and accurately in making precise movements with speed. Ability to make a movement response accurately and quickly. (3) See above.
F	3	FINGER DEXTERITY: Ability to move the fingers and manipulate small objects with the fingers rapidly or accurately. (3) See above.
M	3	MANUAL DESTERITY: Ability to move the hands easily and skillfully. To work with the hands in placing and turning motions. (3) See above.

Language Development (continued)

of household to obtain such information as age, occupation, and number of children, to be used as data for surveys, or economic studies.
- Guide people on tours through historical or public buildings, describing such features as size, value and points of interest.

* *

F. INTERESTS (Continued)

8 - Situations involving a preference for activities of an abstract and creative nature.

E. SPECIFIC VOCATIONAL PREPARATION - Amount of time required to learn the techniques needed for average performance of job duties.

6 Over 1 year up to and including 2 years.

7 Over 2 years up to and including 4 years.

F. INTERESTS - Perferences for certain types of work activities or experiences.

4 - Situations involving a preference for working for people for their presumed good, as in the social welfare sense, or for dealing with people and language in social situations.

6 - Situations involving a preference for activities concerned with people and the communication of ideas.

7 - Situations involving a preference for activities of a scientific and technical nature. (See 2 b)

G. TEMPERAMENTS - Work situation adjustments required.

4 - Situations involving the direction, control, and planning of an entire activity or the activities of others.

5 - Situations involving the necessity of dealing with people in actual job duties beyond giving and receiving instructions.

H. PHYSICAL DEMANDS - Physical demand activities required to perform job tasks

4 - Reaching, Handling, Fingering, and/or Feeling:

(1) Reaching: Extending the hands and arms in any direction.

(2) Handling: Seizing, holding, grasping, turning, or otherwise working with the hand or hands (fingering not involved)

(3) Fingering: Picking, pinching, or otherwise working with the fingers primarily (rather than with the whole hand or arm as in handling).

(4) Feeling: Perceiving such attributes of objects and materials as size, shape, temperature, or texture, by means of receptors in the skin, particularly those of the finger tips.

5 - (1) Talking: Expressing or exchanging ideas by menas of the spoken word.

(2) Hearing: Perceiving the nature of sounds by the ear.

L. LIGHT WORK - Lifting 20 lbs. maximum with frequent lifting and/or carrying of objects weighing up to 10 lbs. Even through the weight lifted may be only a negligible amount, a job is in this category when it requires walking or standing to a significant degree, or when it involves sitting most of the time with a degree of pushing and pulling of arm and/or leg controls.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Program Curriculum Objectives

After completion of four semesters and a summer session, the Fresno City College Registered Nursing student will be able to demonstrate, in varied classroom and clinical settings, his/her ability to apply nursing knowledge, nursing techniques and nursing interventions required for employment as a Licensed Registered Nurse.

Successful completion of the Registered Nursing Program will be determined by each student's ability to demonstrate mastery of the specific evaluation criteria established for: Fundamental Nursing Theory and Process, Introduction to Medical-Surgical Nursing, Maternity Nursing, Nursing of Adults and Children, Anatomy, Physiology, General Psychology, Sociology and Speech. Specific evaluation criteria are stated in each course package.

RESEARCH/DESIGN PROJECT
REGISTERED NURSING

Performance Requirements for the State Program Curriculum Objective

1. To be awarded an A.A. degree in Nursing from Fresno City College, the nursing student must demonstrate mastery of all the courses as outlined in the nursing program curriculum in the Catalogue.

2. In the clinical laboratory, provision must be made for supervision of students that would assist every student to arrive at mastery at the expected level.

3. Prior to actual hospital laboratory experience, all Registered Nursing students must demonstrate mastery of basic fundamental nursing skills in a simulated situation in the nursing skills laboratory.

4. To apply for licensure, the student enrolled in the Registered Nursing Program at Fresno City College must complete the minimum curriculum requirements as stated in section 1433.5 of the "California Laws Relating to Nursing Education, Licensure and Practice."

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Fundamental Nursing Theory and Process (Nursing 1 and 2)

Course Objectives

Successful completion of the Fundamental Nursing Theory and Process course, by the end of the first semester of the first year, will be determined by each student's ability to demonstrate mastery of nursing concepts, understandings, and technical skills at a beginning level in the following areas:

1. The Nurse and Patient
2. The Nurse, the Law and Ethics
3. Developing Good Nurse-Patient Relationships
4. Practice of Medical Asepsis
5. Principles of Body Mechanics
6. The Patient's Environment
7. Admitting, Discharging and Transferring the Patient; The Patient's Record and Nursing Care Plan
8. Obtaining the Vital Signs
9. The Physical Examination
10. Measures to Promote Personal Hygiene
11. Measures to Promote Proper Nutrition and to Maintain Fluid and Electrolyte Balance
12. Measures to Promote Exercise and Activity
13. Measures to Promote Comfort, Rest and Sleep
14. Measures to Promote Elimination from the Large Intestine
15. Practice of Surgical Asepsis
16. Measures to Promote Elimination from the Urinary Bladder
17. Preparation and Administration of Drugs Including the Parenteral Route
18. Measures to Promote Tissue Healing
19. Measures to Promote Respiratory Functioning
20. The Nurse as an Assistant
21. Communicable Disease Control
22. Caring for the Patient When Death Appears Imminent
23. The Nursing Process

Classroom and clinical settings will be used for student learning. Specific evaluation criteria are stated in the course package.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Introduction to Medical-Surgical Nursing (Nursing 3 and 4)

Course Objectives

Successful completion of the course, by the end of the second semester of the first year, will be determined by each student's ability to demonstrate mastery in the following areas:

1. Introduction to Medical-Surgical Nursing
2. Preoperative Care
3. Post-Anesthesia Recovery Room
4. Maintaining Fluid and Electrolyte Balance
5. Care of Patients Who Have Cancer
6. Care of Patients with Problems of the Reproductive System
7. Care of Patients with Conditions of the Breast
8. Introduction to Care of the Aged
9. Conditions of Illness
10. Growth and Development
11. Nutrition

Classroom and clinical settings will be utilized for student learning. Specific evaluation criteria for numbers 1 through 11 above are stated in the course package.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Maternity Nursing (Nursing 5 and 6)
Course Objectives

By the end of the summer session, first year, the student will have completed the course in Maternity Nursing. The student's mastery of the course will be evaluated in the classroom and clinical settings. The student will give evidence of mastery by demonstrating an ability to perform at a beginning practitioner level in family-centered maternity care in the following areas:

1. Orientation to Maternity Nursing
2. Anatomy and Physiology of Reproduction and Fetal Development
3. Normal Pregnancy and Prenatal Care
4. Care of the Patient with Antepartal Complications
5. Phenomena of Labor
6. Analgesia and Anesthesia for Labor
7. Operative Obstetrics and Care of the Patient with Complication of Labor and Delivery
8. Care of the Normal Newborn
9. Postpartum Nursing Care
10. Postpartum Complications
11. Social Factors in Maternal Care

Specific evaluation criteria for numbers 1 through 11 above are contained in the Course Outline.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Nursing of Adults and Children (Nursing 7A, 7B, 8A, 8B)
Course Objectives

By the end of the second year and completion of the course Nursing of Adults and Children, the student will demonstrate mastery of knowledge and technical skills consistent with a beginning practitioner's level.

In the classroom and clinical settings, the student will give evidence of ability to provide safe and effective nursing care to patients with complex problems in the areas defined below:

1. Care of Adults with Problems of Nutrition, Elimination and Locomotion
2. Care of Adults with Problems of Gaseous Exchange, Circulatory and Regulatory Disorders
3. Care of Infants and Children with Problems of Nutrition, Elimination, Locomotion, Gaseous Exchange, Circulatory and Regulatory Disorders
4. Care of Patients with Specific Behavioral Problems

The Course Outline contains the specific criteria of mastery for numbers 1 through 4 defined above.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Chemistry 2A, Introductory General Chemistry

From this allied course, it is required that the registered nursing student demonstrate mastery* of the:

1. Scientific method of problem-solving
2. Meaning of ph
3. Common measurements in the metric system

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN RROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Psychology 7, General Psychology

From this allied course, it is required that the registered nursing student demonstrate mastery* of:

1. Psychology as the scientific study of human behavior, including self
2. Self-observation (introspection) as being as important as the behavior of others in analyzing situations
3. Conscious and unconscious action and be able to distinguish between them
4. A person's reaction(s) to his environment
5. The complexity of human behavior and how it contributes to the difficulty in understanding human behavior
6. The interrelatedness of emotional and physical well being

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Sociology 1A, Introduction to Sociology

From this allied course, it is required that the registered nursing student demonstrate mastery* of:

1. The cultural uniqueness of ethnic groups

2. The forces which influence the behavior of individuals and groups, including:

   a. religion
   b. political
   c. economic
   d. social

3. The structure and functions of society

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Speech 2, Interpersonal Relations

From this allied course, it is required that the registered nursing student demonstrate mastery* of:

1. Positive and negative expressions, feelings and reactions from others and know that both are acceptable given different situations

2. How to develop appropriate interpersonal relationships with others in varying situations through the proper application of the communication techniques of speaking, writing, listening, observing, touching, tasting and smelling

3. That normal human behavior includes both positive and negative impressions and that it is sometimes in a person's best interest to express negative feelings as a means of dealing with the stress of negative life situations, i.e., illness, separation, etc.

4. Body Language, its use and intepretation

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Biology 20, Anatomy & Biology 22, Physiology

From this allied course, it is required that the registered nursing student demonstrate mastery* of:

1. The functions of the body systems
2. The basic metabolic rate
3. Filtration, osmosis, dialysis, diffusion and the ability to relate these terms to movement of materials within the body
4. The "ph" of body fluids
5. Body organs and their placement into the correct organ system, body cavity and quadrant
6. The parts and functions of the cell
7. The components of blood and the role of lymph
8. The functioning of individual body structures and the many feedback mechanisms that control their metabolism

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Allied Courses--Required Mastery

Biology 31, Microbiology

From this allied course, it is required that the registered nursing student demonstrate mastery* of:

1. The difference between pathogenic and nonpathogenic microorganisms
2. The modes of transmission of microorganisms
3. Basic genetics
4. The allergic response
5. The temperature controls of the body
6. Disorders of fluid, electrolytes and acid-base
7. The etiology, diagnosis, prevention and treatment of infections and communicable diseases
8. Autoimmunity and antigen-antibody reactions
9. Toxins and antitoxins
10. The necessity for aseptic technique and a practical grasp of the principles and procedures involved in asepsis, disinfection, sterilization and isolation especially as they relate to personal hygiene and medical care

* Mastery - The ability to demonstrate the Cognitive/Affective and/or Psychomotor learning required of a given body of skills or knowledges

RESEARCH AND DESIGN

PROJECT: MOBILITY

STEPS OF CURRICULUM ANALYSIS

STEP 2

HAVING DEFINED THE REQUIREMENTS OF THE EMPLOYER AND RESTATED THE COLLEGE'S PROGRAMS IN PERFORMANCE TERMS; THE TEAM NOW SEEKS TO IDENTIFY WHAT EACH STUDENT MUST BE ABLE TO KNOW/FEEL/DO IN ORDER TO ACHIEVE THOSE OBJECTIVES. EACH COURSE OBJECTIVE IS ANALYZED TO IDENTIFY THE COGNITIVE/AFFECTIVE/PSYCHOMOTOR MASTERY EACH STUDENT MUST DEMONSTRATE TO SUCCEED. THIS ANALYSIS WILL PROVIDE THE TEAM WITH A DETAILED ENOUGH DEFINITION OF WHAT IS REQUIRED OF EACH COURSE TO SPECIFICALLY PINPOINT WHERE THE PROBLEM AREAS REALLY ARE.

STEP 2:

A) PERFORM A COGNITIVE/AFFECTIVE/PSYCHOMOTOR ANALYSIS OF EACH STATED COURSE OBJECTIVE TO DERIVE ALL HIGHEST LEVELS OF MASTERY REQUIRED FOR SUCCESSFUL COMPLETION OF THE COURSE.

B) STATE THE CRITERIA OF MASTERY FOR EACH ITEM IDENTIFIED IN THE COGNITIVE/AFFECTIVE/PSYCHOMOTOR ANALYSIS. THESE STATEMENTS WOULD INCLUDE THE METHOD OF EVALUATION AND THE LEVEL OF PERFORMANCE REQUIRED OF THE STUDENT (HOW AND HOW WELL). THIS STATEMENT IS NOT THE EXACT TEST ITEM THAT THE STUDENT WOULD ENCOUNTER (CRITERION MEASURE).

C) ASSESS EACH COURSE TO CONFIRM THAT THE SEQUENCING OF THE ITEMS OF MASTERY IS CORRECT ACCORDING TO THE TAXONOMIES; AND THAT THE COMBINED COURSES WILL PRODUCE THE MASTERY DEMANDED BY THE EMPLOYMENT REQUIREMENTS AND THE PROGRAM CURRICULUM OBJECTIVE (VOCATIONAL/OCCUPATIONAL COURSES ONLY).

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Nursing 1 and 2: Fundamental Nursing Theory and Process
Elements of Required Mastery (Cognitive/Affective/Psychomotor)

1.0 Cognitive: Define the role of the nurse in health care delivery.

1.1 Define the following terms: activities of daily living, acute illness, chronic illness, comprehensive health care services, health, the health team, health-illness continuum, patient, policy, principle, procedure, and theory.

1.2 Describe four differences in nursing of years past and nursing today.

1.3 List four examples of curative nursing care, of preventive nursing care, restorative nursing care, and supportive nursing care.

1.4 Describe three guides to nursing action and list an example of each.

1.5 Discuss briefly three reasons why health and nursing teams are important for providing patients with total health care.

1.6 Describe the major responsibilities of the nursing team.

1.7 List the major responsibilities of the nursing team leader.

1.8 List three independent functions of the nurse.

1.9 List three dependent functions of the nurse.

1.10 Describe the four areas that make up comprehensive health care services.

1.11 Describe how the health practitioner provides for continuity of care for patients.

1.12 List two reasons why the amount of money spent on health care in the United States is on the increase.

1.13 Define health.

1.14 Describe the increased demand for health services.

1.15 Describe the health team in terms of the following:

a. its major goal
b. its most important members
c. at least two functions of each of the members listed below:

the patient, the physician, the nursing supervisor, the head nurse, the registered nurse, the nursing student, the vocational

nurse, the nursing assistant, residents, interns, physical therapy, occupational therapy, dietician, social worker, inhalation therapist, laboratory technician, x-ray technician, pharmacist, chaplain.

1.16 Describe the spectrum of health care services in the community.

1.17 Describe the functions of official and voluntary agencies in the prevention of illness and the maintenance of health.

1.18 List the principal providers of primary health care services in Fresno.

1.19 Explain the five main functions of a hospital.

1.20 Discuss at least five factors that influence the particular service a hospital provides for the community.

1.21 Describe four major ways in which hospitals can be classified and give one example of each.

1.22 Explain the meaning of hospital accreditation using terminology that could be comprehended by a lay person and state:

a. who does the accrediting?
b. whether accreditation is a legal (mandatory) or voluntary requirement.
c. why hospitals seek accreditation.
d. what it means to a patient in terms of the quality of care provided.
e. what it means to the nurse in terms of working conditions and legal implications.
f. what would happen if a hospital loses its accreditation.

1.23 Describe the functions of various departments within a hospital.

1.24 Define nursing.

1.25 Describe three primary aspects of the role of the nurse in health care.

1.26 Describe the professional and psychological implications of the role of the nurse.

1.27 Explain the meaning of "registered nurse" or "R.N." with reference to the nurse's qualifications using terminology a lay person could comprehend.

1.28 List three types of basic nursing curricula and state what the graduate of each type of program is prepared to do.

1.29 State the major function of a "technical" nurse and a "professional: nurse.

1.30 Differentiate between "dependent" and "independent" nursing functions.

1.31 Describe how the nurse's recognition of her own emotional needs benefits her patients.

1.32 List three ways in which a nurse may subconsciously relate to her patients that may negatively influence her effectiveness in her interactions with them.

1.33 List three traits often found in the nurse who has achieved a degree of self-awareness and self-acceptance.

1.34 Discuss the major steps in achieving a nonjudgmental attitude toward patients.

1.35 Define nursing ethics.

1.36 Differentiate between nursing ethics and legal aspects of nursing.

1.37 Discuss the necessity for ethics in hospital situations.

1.38 Apply ethical behavior guidelines in judging appropriate choices of action in hypothetical health related situations.

2.0 Outline the psychological and sociological effects of illness and hospitalization on the individual.

2.1 Describe what basic psychosocial need is met when the nurse explains a procedure to a patient.

2.2 List three examples of blocks to patient receptivity to learning.

2.3 List five common expectations patients often have of nurses.

2.4 List five nursing activities that convey respect of patients as individuals.

2.5 Discuss the major steps in achieving a non-judgmental attitude toward patients.

2.6 Describe the impact of sociocultural background on nursing care.

2.7 Describe the impact of illness on the family.

2.8 Describe the concept of health as defined by the World Health Organization, using one's own words.

2.9 Describe the health-illness concept.

2.10 Describe differences in the way people view health and illness.

2.11 State the two major tasks to be faced by anyone with a developing illness.

2.12 Identify at least ten positive and ten negative effects of hospitalization on the individual.

2.13 Explain the role of stress in the causation of illness.

2.14 Recognize at least ten overt manifestations of stress and anxiety.

2.15 List four types of stressors.

2.16 Explain the general adaptation syndrome.

2.17 Explain the "fight-flight" reaction of the body.

2.18 Identify and define the major defense mechanisms and indicate how they operate to control anxiety.

2.19 Name the three stages of illness and describe reactions of patients to each of these three stages.

2.20 Describe the impact of illness on the family.

2.21 Describe the impact of cultural background on nursing care.

2.22 Describe and adequately perform the admission procedure to the hospital.

2.23 Describe and adequately perform the discharge procedure from the hospital.

3.0 State the scientific principles of body mechanics and describe good patterns of body movement.

3.1 List three reasons for using good body mechanics.

3.2 Describe the base of support, the line of gravity, and the center of gravity when the body is in good sitting and standing position.

3.3 List the principles of good body mechanics.

3.4 Define posture.

3.5 Explain the functions of the skeletal bones, body muscles, and spinal nerves in body movement.

3.6 Explain the principle of leverage.

3.7 Explain the importance of muscle activity for the person who is ill.

3.8 Demonstrate safe body mechanics when lifting and moving.

3.9 Describe in detail the full meaning of the term "complete bed rest."

3.10 Differentiate between active and passive exercise and indicate the nursing responsibility in relation to each.

3.11 Name the kinds of joints found in the body.

3.12 List and demonstrate the types of movements permitted by each joint.

3.13 Describe and demonstrate full range of motion exercises for all parts of the body.

3.14 Describe and demonstrate methods of moving patients up in bed.

3.15 Describe and demonstrate methods of transferring patients.

3.16 Demonstrate assisting patients with ambulation.

3.17 Demonstrate assisting patients with crutch ambulation.

3.18 Describe methods for helping an individual to relearn to walk with or without mechanical aids.

3.19 Describe and demonstrate "muscle-setting" exercises for the patient on bed-rest.

3.0 Psychomotor: Practice

3.1 Lifting and moving using the principles of good body mechanics:

patient toward head of bed
supine to side lying position
supine to sitting position
sidelying to prone
dangling patient

3.2 Transferring patients using the principles of good body mechanics:

from bed to chair
from bed to wheel chair
from bed to stretcher
from bed to stretcher with "three man lift"

3.3 Range of motion exercises, both active and passive

3.4 Assisting patients with ambulation

3.5 Assisting patients with crutch ambulation

3.6 Muscle-setting exercises

3.7 Proper body mechanics

3.8 Good posture

4.0 Describe safety as it relates to nursing practice and prevention in health care.

4.1 Discuss the meaning of safety in relation to patient care.

4.2 List ten examples of accidents that commonly occur in the patient's hospital environment.

4.3 State the times when bed side rails and/or protective restraints are necessary.

4.4 Describe advantages and disadvantages of protective restraints and side rails.

4.5 Explain the essential steps to take when an accident occurs in the hospital.

4.6 List five ways in which the nurse can conserve time and energy while making an unoccupied bed.

4.7 List three classes of fires and identify the extinguishers used for each type.

4.8 List the four most common types of hospital fires.

4.9 List five prevention measures usually observed in hospitals.

4.10 Outline the nurse's responsibility in the event of a fire.

4.11 List two reasons why there has been dramatic progress in recent years in the control of communicable diseases.

4.12 State the purpose of using gown and mask when caring for a patient in isolation.

4.13 Describe how to dispose of excretions and secretions safely.

4.14 Describe how supplies and equipment are handled after being used while caring for a patient with a communicable disease, e.g., thermometer, bed linens, blankets and china and silverware.

4.15 List five desirable features of the patient's physical environment when isolation technique is being observed.

4.16 Discuss why frequent and careful handwashing is a vital part of any type of isolation technique.

4.17 List seven types of isolation technique, the purpose and basic requirements of each and two examples of illnesses requiring the use of each type of technique.

4.18 Design a plan that would help meet the psychological needs of a patient when communicable disease techniques are being used.

4.19 Discuss the meaning of safety in relation to patients.

4.20 List the major hazards to patient safety.

4.21 Describe various safety devices used to protect people who are ill in bed.

4.22 List situations where the application of soft restraints would be considered appropriate.

4.23 Discuss the physical and emotional implications of restraints.

4.24 Explain the dangers and hazards of restraints.

4.25 Outline safety measures taken by health agencies to protect patients from medication errors.

4.26 List three classes of fires and identify the extinguishers used for each type of fire.

4.27 Name the most common types of hospital fires.

4.28 List five basic objectives behind all emergency fire procedures.

4.29 List fire prevention measures usually taken in hospitals.

4.30 Outline the nurse's responsibility in the event of fire.

4.31 Describe methods of removing patients from a fire area.

4.32 Describe and demonstrate the use of the incident report.

4.33 State the need for motivation in the prevention of accidents.

4.34 Define infection.

4.35 Name potential sources of infection in a health agency.

4.36 List methods by which microorganisms may be transferred in a hospital.

4.37 Describe a basic procedure for cleaning equipment.

4.38 Differentiate between disinfection and antisepsis.

4.39 Describe methods for the sterilization of equipment used in health agencies.

4.40 Differentiate between medical and surgical asepsis.

4.41 Describe and demonstrate techniques for masking and gowning.

4.42 Describe and demonstrate barrier technique, including both "protective" isolation and "reverse" isolation.

4.43 Describe the common psychological reactions to isolation experienced by the patient, the family and the nurse.

4.44 State the scientific principles upon which isolation techniques are based.

4.45 Describe nursing measures to help patients with their reactions to barrier technique.

5.0 Identify nursing responsibilities that pertain to the psychological, sociocultural, and spiritual needs of patients.

5.1 List five common activities of every person that are learned from a specific culture.

5.2 List three commonly practiced religions in the United States.

5.3 Give an example of a cultural factor that would help to promote healthful living and one that would detract from healthful living.

5.4 Explain why knowing one's own attitude toward impending death is important before caring for a terminally ill patient.

5.5 Describe various ways in which the nurse can help meet the emotional, spiritual and physical needs of the terminally ill patient.

5.6 Describe how the family of a terminally ill patient may be helped to face the loss of a loved one.

5.7 Discuss the relationship of spiritual beliefs and illness.

5.8 List criteria which are helpful in assessing the spiritual needs of the patient.

5.9 Identify nursing responsibilities in the spiritual care of patients.

5.10 Describe the role of the chaplain as a member of the health team.

5.11 Name specific sacraments and aspects of religious custom of the Jewish, Roman Catholic and major Protestant religions which affect the care of patients with these religious beliefs.

5.12 Outline nursing responsibilities in regard to these sacraments and religious customs.

5.13 Establish criteria for evaluating nursing care in relation to the patient's spiritual needs.

6.0 Discuss the concept of homeostatis as it relates to man as an adaptive being.

6.1 Discuss briefly how the body's acid-alkaline and fluid and electrolyte balance are normally maintained.

6.2 State six conditions that promote fluid and electrolyte imbalance if preventive measures are not taken.

6.3 List ten common signs that indicate fluid and electrolyte imbalances are occurring.

6.4 Discuss briefly how fluid and electrolyte disturbances are corrected.

6.5 Define: acidosis, alkalosis, electrolyte, eructation, extracellular fluid, interstitial fluid, intracellular fluid, intravascular fluid, ion, milliequivalent, pH, retching.

6.6 Describe the distribution of fluid and the major electrolytes in the body.

6.7 Identify the normal methods of fluid and electrolyte intake and output to and from the body.

6.8 Explain the principal factors regulating fluid and electrolyte balance in the body.

6.9 Identify the principal mechanisms which maintain the body's acid-base balance.

6.10 List common causes of fluid and electrolyte imbalance.

6.11 List signs and symptoms of common problems of fluid and electrolyte imbalance.

6.12 Recognize significant laboratory findings which may be indicative of fluid and electrolyte balance.

6.13 List principles relevant to fluid and electrolyte balance.

6.14 Describe appropriate nursing action including measures to assist patients to maintain fluid and electrolyte balance and to assist in the restoration of a balance if a disturbance has occurred.

6.15 Describe and demonstrate the nurse's responsibility for IV's including the following: preparation of the patient, selection of site, taping of IV, applying armboard, setting up the IV, calculating rate of flow, adding new IV, removing air from tubing, discontinuing IV, changing gown, piggy back, metriset, and charting.

6.16 Discuss and demonstrate proper and accurate use if I and O.

6.17 Discuss and identify common complications of IV therapy.

7.0 Compare and contrast sepsis and asepsis and the scientific principles of each.

7.1 Define the following terms: aerobe, anerobe, antibiotic, antiseptic, asepsis, bactericide, bacteriostatic, coagulate, contaminate, disfectant, disinfection, germicide, host, isolation, technique, medical asepsis, microorganism, nonpathogen, pathogen, reservoir, spore, sterile, sterilization, surgical asepsis.

7.2 List eight examples of good health practices involving medical asepsis from everyday living. List at least eight additional medical asepsis practices for caring for patient in a health agency.

7.3 Differentiate between the processes of sterilization and disinfection.

7.4 State why spores are difficult to destroy.

7.5 List the four basic needs that most microorganisms require in order to live and reproduce.

7.6 Describe the cycle that explains how microorganisms move from place to place and give examples.

7.7 Discuss briefly why frequent and good handwashing is essential to help prevent the spread of microorganisms.

7.8 List at least ten guides to follow when cleaning equipment and supplies with soap or detergent and water and give the rationale for each.

7.9 List four guides that help to select a proper sterilization or disinfection method.

7.10 List two methods of chemical disinfection and sterilization.

7.11 List four methods of physical disinfection and sterilization.

7.12 List three methods of disinfection and sterilization that can be used in most homes conveniently.

8.0 Outline the nursing process.

8.1 List the components of the nursing process.

8.2 Define problem solving.

8.3 Apply the nursing process to a given hypothetical situation.

9.0 Identify the legal responsibilities of the nurse.

9.1 List four sources of laws and give an example of a law from each of these sources.

9.2 State one example of a wrong that, in the eyes of the law, could be considered a felony; a misdemeanor; negligence; assault; battery; slander; libel; false imprisonment; and invasion of privacy.

9.3 List the responsibilities of a person who witnesses the signing of a will.

9.4 Give an example of a privileged act.

9.5 Discuss how privilege is present when Good Samaritan Laws are observed.

9.6 Discuss why students in nursing can be expected to be held responsible for their acts while caring for patients.

9.7 List where student and graduate registered nurses can obtain liability insurance.

9.8 Determine whether the laws are permissive or mandatory for nurses after reading the Nurse Practice Act for the state of California.

9.9 List three responsibilities of state boards of nursing.

9.10 Describe in a sentence or two how a code of ethics is best enforced.

9.11 Describe the purpose of a code of ethics.

10.0 Describe the role of the nurse in relation to continuity of care for individuals and their families.

11.0 Identify community resources which meet specific health needs of patients and families.

12.0 Demonstrate a basic understanding of pathophysiological processes as they relate to patients with medical-surgical problems.

12.1 Discuss how the body reacts to injury and how healing occurs.

13.0 State the basic rationale for the nursing of patients with chronic and acute medical conditions.

13.1 Define the terms constipation, diarrhea, defecation, stool, incontinence, flatus, tenesmus, melena.

13.2 Describe the physiology of elimination from the gastrointestinal tract.

13.3 Explain the etiology of constipation and diarrhea.

13.4 Describe signs and symptoms that frequently accompany constipation and diarrhea.

13.5 Assess the nursing needs of patients with these conditions.

13.6 List principles basic to the care of these patients.

13.7 Establish goals for nursing care.

13.8 Describe measures to:

a. reestablish normal fecal elimination.
b. relieve distressing symptoms.
c. maintain fluid and electrolyte balance.
d. maintain adequate nutritional status.
e. maintain comfort and hygiene.

13.9 Differentiate between a retention and a nonretention enema.

13.10 Explain the procedure for mixing 1000 ml. of a normal saline solution for an enema.

13.11 Describe and demonstrate the following procedures: disposable enema, SSE or TWE, rectal tube, flatus bag, Harris flush, removal of impaction.

13.12 Differentiate between an enema and a colostomy irrigation.

13.13 Differentiate between the distal and proximal loops of the colostomy.

13.14 Describe the emotional implications of a colostomy.

13.15 Discuss colostomy skin care.

13.16 Describe and demonstrate colostomy care, including the irrigation, dressings and skin care.

14.0 Identify the classification, major action, use, and side effects of drugs commonly used for chronic and acute medical-surgical conditions.

14.1 Describe methods commonly used to safeguard drug use.

14.2 Interpret abbreviations commonly used when prescribing and administering drugs.

14.3 List the parts of a medication order and specify what is included in each part.

14.4 List five common types of medication orders and describe each one.

14.5 State three types of situations in which a patient's medication orders are discontinued automatically.

14.6 State the general principles for preparing and administering drugs.

14.7 Describe how the label of a drug container is checked with the medication.

14.8 List the five RIGHTS or preparing and administering drugs.

14.9 Describe how to give a sublingual and a buccal medication.

14.10 Explain why sterile technique is used for parenteral drug administration.

14.11 State the sizes of syringes and how they are calibrated.

14.12 State the size of the needles commonly used for subcutaneous, intramuscular, intradermal and insulin injections.

14.13 List factors that influence the selection of the size of the needle and syringe.

14.14 Discuss why an air bubble is often left in the syringe when a drug is prepared for injection.

14.15 Obtain a passing score of 90% on "The Mathematics of Drugs and Solutions" test.

14.16 Describe methods commonly used in health agencies for recording and communicating physician's medication orders for patients.

14.17 Name basic principles related to the administration of medications.

14.18 List general safety precautions the nurse observes in the preparation and administration of medications.

14.19 Identify common routes for the administration of medications.

14.20 Compare the advantages and disadvantages of administering medications via the oral, subcutaneous and intramuscular routes.

14.21 List criteria for selecting an injection site for medications to be given by the subcutaneous route.

14.22 Describe the preparation and administration of medications to be given by the oral route. Demonstrate the procedure.

14.23 Describe and demonstrate the preparation and basic technique for the administration of medicines by the subcutaneous route.

14.24 List criteria for selecting an injection site for an intramuscular injection.

14.25 Compare the advantages and disadvantages of commonly used sites.

14.26 Describe and demonstrate the preparation and technique of administration of medications by the intramuscular route.

14.27 Demonstrate and discuss the following procedures:

- opening an ampule
- withdrawing from ampule
- withdrawing from vial
- checking medicine cards with Kardex
- use of narcotic book
- pouring oral medications, liquid and tablets
- giving eye drops
- insertion of suppositories
- IM and SQ injections
- use of tubex
- intradermal injections
- mixing two solutions in syringe
- mixing powder into solution
- Z-track technique
- use of insulin syringe
- use of needle to equalize pressure
- checking of armband
- application of ointments
- insertion of ear drops
- crushing tablets
- giving meds through nasogastric tube
- breaking scored tablets

15.0 Demonstrate skill in mathematical computations required for the safe administration of medications.

16.0 Cognitive

16.1 Define the term "therapeutic environment."

16.2 Name factors in the social environment of the hospital which will affect the patient.

16.3 List components of the physical environment of the hospital which contribute to the patient's comfort.

16.4 Make a list of at least ten suggestions for changing hospital routines that would not interfere with therapy but would improve the patient's sense of worth and dignity.

16.5 Devise an admission procedure and a discharge procedure that would respect the patient as a person.

16.6 Describe and demonstrate the essential activities in the provision of oral hygiene in each of the following situations:

a. a patient who requires no assistance
b. a patient who is completely dependent
c. a patient who has artificial dentures
d. a patient who is reluctant to receive oral hygiene but definitely requires it

16.7 State at least five factors influencing the frequency of provision of oral hygiene.

16.8 Describe changes that take place in the skin during the life cycle.

16.9 Describe and demonstrate the essential activities in the provision of a bath in each of the following situations:

a. a patient who requires a complete bed bath
b. a patient who can bathe himself but must remain in his bed
c. a patient who requires a shower
d. a patient who requires a tub bath

16.10 State at least five factors influencing the frequency of provision of skin care or bathing.

16.11 Describe precautions to be taken when patients have a tub bath.

16.12 State factors influencing the frequency of and the essential activities in the provision of nail care and combing, brushing and shampooing the hair.

16.13 Describe and demonstrate how to give a back rub.

16.14 Describe and demonstrate proper handwashing.

16.15 Describe and demonstrate giving perineal care to both the male and female patient.

16.16 Describe and demonstrate care of the hair and nails.

16.17 List the causes and warning signs of decubitus ulcers.

16.18 Describe nursing measures which can be taken to prevent the development of an ulcer.

16.19 Describe the sites where decubiti are most likely to develop.

16.20 Describe and demonstrate the essential activities associated with the administration or removal of a bedpan, fracture pan and urinal.

16.21 Outline measures to be taken in the care of patients with pediculosis.

16.22 Describe and demonstrate the essential activities in p.m. and a.m. care.

16.0 Psychomotor: Assist in creating a therapeutic and safe environment and apply basic hygiene for the well-being of patients.

16.1 Demonstrate how to wash forearms, wrists and hands and explain the rationale.

16.2 Demonstrate how to clean, disinfect and sterilize several contaminated items following the guidelines of medical-surgical asepsis.

16.3 Demonstrate how to clean a patient's supplies and equipment after discharge and give the scientific rationale.

16.4 Demonstrate the following personal hygiene procedures using the principles of medical asepsis, good body mechanics and safety:

a. offering and removing a bedpan and urinal
b. measuring and recording urinary output and bowel movement
c. giving a complete bed bath with backrub
d. making an occupied bed
e. giving oral hygiene
f. cleaning dentures
g. cleaning eye glasses
h. cleaning eyes when there is discharge present

16.5 Demonstrate how to do a gastric gavage and lavage, demonstrating three ways to check the placement of the N.G. tube.

16.6 Safely apply wrist, ankle, jacket and belt restraints.

16.7 Correctly make an unoccupied bed following principles of safety and good body mechanics.

16.8 Demonstrate the correct use of fire extinguishers.

16.9 Demonstrate methods of removing patients from a fire area.

16.10 Admit a patient to the hospital correctly and make accurate notations on the patient's record.

16.11 Given a nursing situation, chart appropriately using the correct form and abbreviations.

16.12 Conduct a real or role-playing interview, complete a nursing history, and prepare a nursing care plan.

16.13 After completing care for an assigned patient, give an accurate and appropriate oral report to the team leader before leaving the clinical area.

17.0 Gather data for the effective use of the nursing process.

17.1 Define "nursing process."

17.2 List the basic steps in nursing process.

17.3 Name sources the nurse uses in gathering information about the patient.

17.4 Describe the nursing history as a tool for gathering information about the patient.

17.5 Describe the relationship between the problem solving process and the process of providing nursing care.

17.6 Define a nursing principle.

17.7 Given a common situation, apply the nursing process.

17.8 Prepare a nursing care plan based on information gained by role-playing a nursing history interview with the situation provided.

17.9 Discuss Abdellah's four main groups of nursing problems.

17.10 Explain the purpose of nursing care plans.

17.11 Describe methods for evaluating the effectiveness of nursing care.

18.0 Identify patients' basic human needs accurately, concisely and completely.

18.1 Describe the physiological basis underlying systolic and diastolic pressure with reference to ventricular activity.

18.2 Differentiate between pulse pressure and pulse deficit.

18.3 State the units of measurement in which blood pressure is recorded.

18.4 Identify the instruments used in obtaining a patient's blood pressure.

18.5 State and recognize at least five factors that may cause an alteration in a patient's blood pressure.

18.6 State and recognize in a patient a blood pressure reading that would be considered within the normal range for an adult patient.

18.7 Define pulse rate with reference to the state of the arterial walls and the activity of the ventricle.

18.8 Define and identify each of the following in a clinical situation:

dicrotic pulse
tachycardia
bradycardia
bounding pulse
thready pulse

18.9 State and recognize pulse rate that would be considered normal range for an adult as specified by the American Heart Association.

18.10 State the two observational methods by which the pulse rate can be determined.

18.11 Define and obtain a patient's pulse deficit accurately.

18.12 State and recognize at least five factors that may be responsible for causing an elevation in the patient's pulse rate.

18.13 List and implement three observations, in addition to rate, that should be made regarding the quality of a patient's pulse.

18.14 Describe the physiological basis for respiration and reference to:

a. thoracic and atmospheric pressure differences
b. alterations in blood gases
c. neurological control

18.15 Define and identify each of the following in a clinical situation:

dyspnea
orthopnea
apnea
hyperventilation
Cheyne-Stokes respirations

18.16 State and recognize in a patient respiratory rate that would be considered within the normal rate for an adult.

18.17 List and perform three observations, in addition to rate, that should be made regarding the quality of a patient's respirations.

18.18 State at least five causes for an alteration in the patient's respiratory rate.

18.19 Describe ways in which the nurse uses her senses of sight, hearing, touch and smell in making observations about the patient.

18.20 State all the information that can be obtained regarding a patient from each of the following:

kardex	history and physical sheet
doctor's order sheet	nurse's notes
graphic sheet	laboratory sheet
medication sheet	radiology report
progress notes	intake and output sheet
consent form	

18.21 Describe methods used by the physician in observing patients.

18.22 Differentiate between subjective, objective and cardinal symptoms.

18.23 State the four body mechanisms that comprise "vital signs."

18.24 Describe the role of the hypothalamus in the maintenance of normal body temperature.

18.25 Describe body temperature in terms of heat production and heat loss.

18.26 State and recognize the average normal oral, rectal and axillary temperature for an adult.

18.27 Define, using terminology a lay person could understand, or recognize definitions of the following words:

afebrile febrile phrexia fever

18.28 Identify the two main parts of a clinical thermometer.

18.29 State and recognize one distinguishing feature of a rectal thermometer.

18.30 State and recognize at least five factors that may cause an elevation in body temperature.

18.31 State the method of obtaining body temperature that is most accurate and also the one that is least accurate and state the reason for each.

18.32 Read a clinical thermometer accurately. (i.e. corresponds exactly to the reading obtained by the clinical instructor.)

18.33 Identify at least five conditions that would contraindicate obtaining a patient's temperature using the oral method.

18.34 Identify at least three physical conditions that would contra-indicate obtaining a patient's temperature using the rectal method.

18.35 Describe the basic anatomical position.

18.36 Describe and demonstrate positioning a patient in the following positions: supine, prone, sidelying (Sim's), dorsal recumbent, Fowler's Trendelenberg, genupectoral (knee-chest), lithotomy, jack knife.

18.37 Describe and demonstrate methods of bedmaking utilizing principles of safety and comfort for both nurse and patient.

18.38 Describe and demonstrate various methods, types of mattresses, mechanical and other devices that may be used for therapeutic or comfort reasons.

18.0 Psychomotor: Report and record those observations pertaining to a patient's basic physical needs accurately, concisely and completely. Provide safe psychological and physical comfort for all patients through the nursing process.

18.1 Following the principles of safety and good body mechanics, the student will demonstrate the following skills:

a. Positioning a patient to provide proper body alignment in the back-lying, side-lying, face-lying and Fowler's Positions.
b. Putting each joint through its range of motion exercises.
c. Moving a patient up in bed by herself and with the help of another nurse.
d. Moving a patient from bed to stretcher with a draw sheet and with the three man lift.
e. Moving a patient from bed to chair and from chair to bed.
f. Exercises that can be carried out by the bedridden patient which help prepare him for ambulation.
g. Assisting a patient with ambulation.

18.2 Employ the nursing process and the steps of problem solving in the basic care of patients.

18.3 Given an actual or hypothetical situation involving a patient, the student will be able to:

a. use a stethoscope properly to obtain a patient's heart rate accurately (i.e., the rate obtained must be within a range of five beats/min. as determined simultaneously by the nursing instructor)
b. perform the essential activities, as presented in the audio-visual material and implementing the ten basic steps for safe performance, in obtaining pulse rate accurately using the radial, brachial, carotid, femoral, pedal, and apical sites.

18.4 Given an actual or hypothetical situation involving a patient, the student will be able to:

a. perform the essential activities, as presented in the audio-visual material and implementing the ten basic steps for safe performance, in obtaining blood pressure accurately by the auscultatory and palpatory methods. (The reading obtained by the student and the instructor taken simultaneously must be within a range of 10 mm. Hg.)
b. state and recognize at least three factors that might influence the extremity selected for application of the blood pressure cuff.

18.5 Perform the essential activities, as presented in the audio-visual materials and implementing the ten basic steps for safe performance, in obtaining respiratory rate unobtrusively and accurately. (The rate obtained by the student and the nursing instructor taken simultaneously must be within a range of two respirations per minute.)

18.6 Perform the essential activities, as presented in the audio-visual presentation and implementing the ten basic steps for safe performance, in obtaining body temperature accurately using the oral, rectal and axillary methods.

18.7 State the initial action taken by the nurse if the patient's body temperature suddenly seems to be elevated when it had been normal previously.

18.8 Utilize the safest and most effective method of taking the patient's temperature and explain the reason for this action, as determined by the individual's physical condition.

19.0 Cognitive: Identify cardinal signs and symptoms in patients.

19.1 Accurately obtain an oral, rectal and axillary temperature.

19.2 Accurately take a radial, apical, femoral, carotid and pedal pulse and demonstrate the procedure for apical-radial pulse.

19.3 Accurately take a B/P.

19.4 Clean a glass thermometer following the principles of medical asepsis.

20.0 Meet the nutritional needs of patients.

20.1 Explain the purpose of the patient's record.

20.2 List the types of information that are kept on this record.

20.3 Describe ways in which the record is used.

20.4 Name four guiding points to keep in mind when recording.

20.5 Describe the following parts of the patient's record, including the type of information contained on it and nursing responsibilities in regard to it:

Face sheet Doctor's order sheet History sheet

20.6 Name five categories of information recorded in the nurse's notes.

20.7 Outline pertinent data that should be included in the nurse's notes for each of the five categories of information.

20.8 Use accurately the commonly used terms and abbreviations.

20.9 List four reasons why nurse's notes are written.

20.10 Identify three rules that are enforced by most hospitals relating to charts.

20.11 Describe how a chart is maintained.

20.0 Psychomotor: Chart the prescribed exercises following rules of good charting.

21.0 Cognitive

21.1 List the basic sources from which drugs are derived.

21.2 Differentiate between the meanings of the following names given drugs: official, trade, and generic.

21.3 Identify the various forms in which drugs are manufactured.

21.4 Discuss factors that influence the action of drugs.

21.5 List routes of drug administration.

21.6 Discuss expected actions of drugs as well as possible side effects.

21.7 Discuss factors which make one route of administration preferable over another.

21.8 Use appropriate terminology and abbreviations related to pharmacology.

21.9 Identify devices used for administering medications.

21.10 Discuss control measures relating to drugs:

Federal and state legislation Hospital policy

21.11 Locate drug information utilizing the following sources: PDR, literature file, drug reference books, pharmacist.

21.12 Identify classifications of drugs.

21.13 Write the desired effect or action of the following classifications: analgesics, sedatives/hypnotics, tranquilizers, anti-infectives, anti-emetics, analygesic-antipyretics, anticholinergics, antacids, cathartics, vitamins, antihistamines, hormones, anesthetics.

21.14 Discuss how drugs are ordered for the patient.

21.15 Write a medication card containing all information required to assure safe administration.

21.16 Discuss psychosocial aspects of drug therapy.

21.17 Identify drugs currently considered in the drug abuse category.

21.18 Discuss the role of the nurse in drug abuse.

21.0 Psychomotor

21.1 Prepare the following types of drugs using the appropriate procedures:

a. oral
b. parenteral--withdraw medications from a vial and an ampule
c. Topical medications

21.2 Administer the following types of medications correctly:

oral
parenteral--subcutaneous, intramuscular and intradermal
topical
instillations--eye, nose

21.3 Identify symptoms of infiltration and inflammation at IV sites, adjust flow rate and discontinue IV's.

21.4 Compute simple drug problems accurately using apothecary, metric, and household measures.

22.0 Cognitive: Care for wounds safely.

22.1 Define terms commonly used to classify wounds.

22.2 Describe the three stages of wound healing.

22.3 Differentiate between healing by first, second and third intention.

22.4 List factors which affect wound healing.

22.5 List factors predisposing to the development of infection in a wound.

22.6 Name microorganisms frequently found in infected wounds.

22.7 Describe localized and general symptoms of wound infection.

22.8 Describe a safe technique for carrying out a sterile dressing.

22.9 Explain the purposes of binders, the types commonly used, principles relevant to their application and problems associated with their use.

22.10 Explain the purposes for which bandages are used, materials commonly used in their manufacture and principles relevant to their use.

22.11 Describe five turns used in bandaging.

22.12 Discuss the safe use of transfer forceps.

22.13 Describe the procedure of setting up a sterile field.

22.14 Describe the application of sterile gloves.

22.0 Psychomotor

22.1 Demonstrate how to change a wound dressing using the principles of aseptic technique.

22.2 Demonstrate how to apply elasticized stockings.

22.3 Demonstrate the proper application of the T binder, the scultetus binder, the roller bandage to the leg and the sling.

22.4 Accurately record and report her observations about wounds using appropriate medical terminology.

22.5 Demonstrate a safe technique for carrying out a sterile dressing.

22.6 Demonstrate five turns used in bandaging.

22.7 Demonstrate the safe use of transfer forceps.

22.8 Demonstrate the procedure of setting up a sterile field.

22.9 Demonstrate the application of sterile gloves.

22.10 Demonstrate the application of finders and bandages using the principles for safe performance of nursing procedures.

23.0 Cognitive: Assist safely with diagnostic or therapeutic measures, physical examinations, and the collection of specimens.

23.1 Identify instruments commonly used during a physical examination and demonstrate how each one operates.

23.2 Name three component parts of a complete physical examination.

23.3 List types of information usually included in the case history.

23.4 Outline the nurse's responsibilities in assisting with the physical examination itself.

23.5 Name nursing functions relative to the collection of specimens.

23.6 Outline general responsibilities of the nurse when assisting with medical procedures--before, during and after the procedure.

23.7 Describe the purpose and procedure of each of the following diagnostic or therapeutic measures:

lumbar puncture
paracentesis
thoracentesis
x-rays
special x-ray examinations
basal metabolic rate
electrocardiography
electroencephalography

23.8 Outline specific nursing responsibilities in assisting with each of these measures.

23.9 Describe the purpose of the following:

urinalysis
complete blood count
SMA 12
gastric analysis
sputum exam
cultures of body secretions or discharges

23.0 Psychomotor

23.1 Demonstrate how to place and drape a patient in each of the following positions: prone, erect, dorsal, recumbent, lithotomy, left and right Sims', genupectoral.

23.2 Demonstrate how to record information concerning a physical examination.

23.3 Demonstrate how to catheterize a female and a male patient.

23.4 Demonstrate how to test a urine specimen for sugar and for acetone.

23.5 Demonstrate the following procedures:

a. plugging an indwelling catheter
b. ambulation of a patient with an indwelling catheter
c. obtaining a urine specimen from a patient with an indwelling catheter.

23.6 Demonstrate how to set up and regulate oxygen equipment for nasal cannula, nasal catheter, and face mask.

23.7 Demonstrate turning, coughing and deep breathing.

23.8 Demonstrate how to set up and assist with a diagnostic procedure.

23.9 Demonstrate the proper way to put on and remove a gown when caring for a patient in isolation.

23.10 Demonstrate double bagging technique.

23.11 Demonstrate collection of specimens.

23.12 Demonstrate testing for sugar and acetone and charting in proper place.

24.0 Cognitive: Assess the needs of patients who have problems of elimination.

24.1 Define micturition, anuria, hematuria, pyuria, polyuria, oliguria, dysuria, albuminuria, glycosuria, incontinence, frequency, urgency.

24.2 Describe the anatomical structures and physiological mechanisms involved in the excretion of urine.

24.3 Explain factors which can cause disturbances of urinary functioning.

24.4 Describe methods to assess needs of patients with urinary problems.

24.5 List signs and symptoms which are frequently observed in patients with urinary problems.

24.6 List constituents of normal urine and identify abnormal constituents from a patient's urinalysis report.

24.7 Cite principal objectives in the care of patients who have situations requiring priority action in their care.

24.8 Differentiate between the retention of urine, retention with overflow and suppression of urine.

24.9 Describe nursing measures to facilitate the elimination of urine from the bladder.

24.10 Describe measures to assist the patient in the reestablishment of a normal voiding pattern.

24.11 Describe specific nursing measures frequently used in the care of patients with urinary problems.

24.12 Describe the nurse's role in assisting with measures that reduce the workload on the kidneys.

24.13 Explain a catheter irrigation using the guide to the safe performance of a nursing procedure, intermittent and continuous.

24.14 Differentiate between the procedure for a male and female catheterization.

24.15 Discuss "adequate urine drainage" and "weaning from a catheter."

24.16 Discuss care of a Foley catheter, including emptying the bag, ambulating the patient, plugging the catheter, obtaining a specimen, discontinuing the catheter.

24.17 Discuss care of the suprapubic catheter.

24.18 Explain the use of various drainage devices.

25.0 Cognitive: Assist patients with the alleviation of pain.

25.1 Describe the physiological mechanisms for receiving, transmitting and interpreting pain sensations.

25.2 Explain present thinking regarding the cause of pain by various types of stimuli.

25.3 List major types of pain.

25.4 Differentiate between pain perception and pain reaction.

25.5 List factors which affect pain perception.

25.6 Describe physiological manifestations of the pain reaction.

25.7 List factors influencing an individual's behavioral response to pain.

25.8 Assess the nursing needs of patients who have pain.

25.9 List principles relevant to the care of patients in pain.

25.10 Describe appropriate nursing action, including measures to eliminate or minimize painful stimuli, measures to alleviate pain and measures to assist patients to handle pain.

25.11 Establish criteria for evaluating the effectiveness of nursing action.

26.0 Cognitive: Use nursing skills to assist patients who have anorexia, nausea and vomiting.

26.1 Define the terms anorexia, nausea and vomiting.

26.2 Use appropriate terminology in recording and reporting observations about patients with these symptoms.

26.3 Describe the anatomical structures and physiological mechanisms involved in these symptoms.

26.4 Explain the etiology of these conditions.

26.5 Describe signs and symptoms that commonly accompany anorexia, nausea and vomiting.

26.6 Assess the nursing needs of patients with these symptoms.

26.7 Describe appropriate nursing action including measures to prevent these symptoms, to assist in maintaining hydration and nutritional status, and to provide the patient with comfort and support.

26.8 Demonstrate an understanding of gastric intubation, including lavage, gavage and use of a Miller-Abbott tube.

26.9 Define emesis, eructation, regurgitation and projectile vomiting.

26.10 Explain intubation with a Levine tube.

26.11 Discuss the use of gastric suction including water displacement, intermittent, wall and electric.

26.12 List observations that must be made when emptying drainage from gastric suction.

26.13 Describe a tube feeding with both syringe and continuous drip method.

26.14 Discuss the irrigation of the nasogastric tube.

26.15 Outline the nurse's responsibility in caring for the patient with gastric and gastrointestinal decompression.

26.0 Psychomotor

26.1 Demonstrate intubation with a Levine tube.

26.2 Demonstrate the use of gastric suction including water displacement, intermittent, wall and electric.

26.3 Demonstrate a tube feeding with both syringe and continuous drip method.

26.4 Demonstrate the administration of medications through a nasogastric tube.

26.5 Demonstrate the irrigation of the nasogastric tube.

27.0 Cognitive: Apply nursing interventions in the care of febrile patients.

27.1 Define fever, pyrexia, hyperthermia, chill.

27.2 Use correct terminology to record and report observations concerning patients with fever.

27.3 Explain the primary factor affecting heat production in the body and the processes by which heat is lost from the body.

27.4 Describe the normal activities and physiological factors that may cause an elevation in temperature and list the common pathological conditions that may give rise to fever.

27.5 Describe the manifestations of fever that may be observed in patients.

27.6 Identify the nursing needs of the febrile patient.

27.7 Describe appropriate nursing action, including measures to reduce heat production and facilitate heat loss, and measures to minimize the effects of heat on the body.

27.8 Discuss the nurse's responsibility when a patient is being treated with hypothermia.

28.0 Cognitive: Determine priorities for nursing action for the patient with dyspnea.

28.1 Define dyspnea, cyanosis, hypoxia.

28.2 Use appropriate terminology in recording and reporting observations about the patient with dyspnea.

28.3 Describe the physiology of respiration, including the five basic processes involved.

28.4 List factors which may interfere with the normal functioning of these processes.

28.5 Describe signs and symptoms of oxygen deficiency which may accompany dyspnea.

28.6 List principles basic to the care of patients with dyspnea.

28.7 Determine priorities for nursing intervention; describe emergency measures that may be used in the case of respiratory failure.

28.8 Describe and demonstrate appropriate nursing action to:

a. maintain patency of the patient's airway
b. increase ventilatory efficiency
c. ensure adequate oxygen intake
d. decrease bodily needs for oxygen
e. minimize the patient's anxiety

28.9 Describe safety measures in the use of oxygen.

28.10 Discuss and demonstrate turning, coughing and deep breathing.

28.11 Discuss and demonstrate postural drainage, vibrating and clapping.

28.12 List the general principles in the administration of any type of oxygen.

28.13 Demonstrate a basic understanding of the use of intermittent positive pressure breathing.

28.14 Demonstrate a beginning understanding of the care of a tracheostomy.

28.15 Describe and demonstrate a basic understanding of resuscitation techniques.

28.16 Describe and demonstrate the administration of oxygen via cannula, catheter, mask and tent.

28.0 Psychomotor

28.1 Demonstrate appropriate nursing action to:

a. maintain patency of the patient's airway
b. increase ventilatory efficiency
c. ensure adequate oxygen intake
d. decrease bodily needs for oxygen
e. minimize the patient's anxiety

28.2 Demonstrate turning, coughing and deep breathing.

28.3 Demonstrate postural drainage, vibrating and clapping.

28.4 Demonstrate basic resuscitation techniques.

28.5 Demonstrate the administration of oxygen via cannula, catheter, mask and tent.

29.0 Apply heat and cold as therapeutic agents safely.

29.1 List principles from the biophysical sciences relevant to the use of heat and cold as therapeutic agents.

29.2 Explain reasons for the application of heat.

29.3 Explain reasons for the application of cold.

29.4 Describe the physiological effects of heat and cold on the body.

29.5 Describe measures commonly used for the local application of heat to the body.

29.6 Describe measures commonly used for the local application of cold to the body.

29.7 Differentiate between irritants and counterirritants and give an example of each.

29.0 Psychomotor

29.1 Demonstrate the use of commonly used measures for the local application of heat and cold to the body.

29.2 Demonstrate care of devices used to administer heat and cold.

30.0 Cognitive: Assist dying patients and their families with the processes of death and dying.

30.1 List and discuss the five stages of dying.

30.2 Describe the physical needs of the terminally ill patient.

30.3 Discuss the difference between the signs of imminent death and the signs of death itself.

30.4 Demonstrate a knowledge of the principles of care of the body after death.

30.5 Demonstrate an awareness of your own feelings toward death and dying.

30.6 Identify the influence of cultural, religious and personality factors on the patient's reaction to impending death.

30.7 Identify the need of the dying patient and his family for emotional support.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Nursing 3 and 4: Introduction to Medical-Surgical Nursing

Elements of Required Mastery (Cognitive/Affective/Psychomotor)

1.0 Cognitive: Identify the pathophysiology of disease processes.

1.1 Define disease.

1.2 List and describe the causes of disease.

1.3 List and explain the body's external defenses against injury and disease.

1.4 Describe the body's internal defenses against invasion by pathogens: the inflammatory response and the antigen-antibody response.

1.5 Review the healing process.

1.6 List and demonstrate an understanding of the principles that make possible the invasion of human beings by pathogens.

1.7 Define the following:

cellulitis	abscess	necrosis	toxoid
peritonitis	sinus	leukocytosis	vaccine
pyemia	furuncle	phagocytosis	toxin
septicemia	toxemia	exudate	keloid
fistula	empyeme	Betadine	adhesion
carbuncle	pneumothorax	active immunity	gangrene
hemotoma	Dakin's Solution	passive immunity	contusion

1.8 Review how the application of heat affects the inflammatory process.

1.9 Review the factors that determine the severity of an infection.

1.10 Discuss the organisms that most frequently infect wounds.

1.11 Review the ways in which an infection can spread through the body.

1.12 Discuss the rationale for the use of corticosteroids in the treatment of an inflammation.

1.13 Explain the body's allergic response and discuss the drugs and their actions that are used to control this response.

1.14 Discuss anaphylactic shock.

1.15 Describe the following tests and the nursing responsibilities involved in each test:

urinalysis	typing and crossmatching
CBC	sedimentation rate
SMA 12	throat culture
VDRL	stool specimen
chest x-ray	gastric analysis
blood chemistries	24 hour urine
Hgb. and Hct.	

1.16 Give the normal values of the following tests:

RBC	hemoglobin
WBC	differential
hematocrit	urinanalysis

1.17 Explain the purpose of a differential WBC.

1.18 Review the following procedures:

gastric analysis	EKG
EEG	spinal tap (LP)

1.19 Name two categories of drugs classified as anti-infectives.

1.20 List at least ten anti-infectives and include their action, usual dose, method of administration and special precautions.

1.21 Describe physiological alterations occurring in the system as a result of general anesthesia.

1.22 Identify safety factors, bacteriological, psychological and physical, related to intra-operative care of the patient.

1.23 Differentiate between an anesthetist and an anesthesiologist.

1.24 Describe fears and anxieties patients may have related to anesthesia.

1.25 Know the stages of general anesthesia.

1.26 Use the nursing process in caring for patients with the following problems:

infections	blood transfusions
disorders of the reproductive tract and breast	surgery
	chronic illness
clinical emergency	anesthesia recovery

1.27 When caring for a patient with an infection, identify the organism causing the infection, factors determining the severity of the infection, symptoms and lab results identifying the infection, and the treatment the patient is receiving.

2.0 Describe the progressive stages of growth and development including the socio-cultural expectations for each stage from birth to senior life.

2.1 Define the terms: aged, gerontology, geriatrics, senile, senility, senescence.

2.2 Explain briefly the various aspects of the aging process referred to as: biological aging, social aging, cognitive aging, affective aging.

2.3 Differentiate between the problems of the aged and the process of aging.

2.4 List the four major categories of problems that the elderly must deal with.

2.5 List the basic human needs of all elderly people.

2.6 Discuss statistics, their causes and implications, related to the elderly, e.g., the percent of the American population over 65 years and the life expectancy today.

2.7 Express, in small groups, attitudes and feelings regarding the aged and convalescent homes.

2.8 Diffferentiate between catabolism and anabolism.

2.9 List the changes that take place in the various body systems due to the aging process:

musculoskeletal
excretory
respiratory
cardiovascular
digestive
endocrine
integumentary
nervous
special senses

2.10 Relate nursing principles to a given aging process.

2.11 Determine from a given list of symptoms which are due to normal aging and which might represent pathological changes.

2.12 Explain the aged persons adaptation to stress.

2.13 Given a description of an aged patient experiencing stress, list three actions that a nurse can take to support him through the experience.

2.14 State the organizations, and their functions, on a national level that are concerned with the aging.

2.15 State some problems and needs that led to the formation of these national organizations.

2.16 List the local agencies that are concerned with meeting the needs of elderly citizens.

2.17 List ways a person can prepare for retirement years--physically, psychologically, economically.

2.18 List the developmental tasks for this age group.

2.19 List the major factors that determine how well an individual adjusts to old age.

2.20 Identify the three basic psyschosocial needs of the elderly.

2.21 Describe how they differ from the younger person's, how these needs are complicated by old age, and how they can be satisfactorily met.

2.22 Explain why there are at least 20% more women than men in institutions for the elderly.

2.23 Define "disengagement theory" and list the stages involved.

2.24 Outline the five stages of dying and apply them to the elderly.

2.25 List the values and effects of interage interaction.

2.26 List the causes of suicide attempts in the elderly.

2.27 Discuss the stereotyped ideas associated with sex and the older person.

2.28 List some effective ways of better communication with the elderly and give the rationale.

2.29 Outline a plan to promote involvement and socialization of the elderly.

2.30 Describe how an aged person's life can be made purposeful.

2.31 List the advantages and disadvantages of becoming aged.

2.32 Compare the positive and negative aspects of having the elderly placed in American nursing homes.

2.33 State the physical and psychosocial changes that alter the hygienic practices in the elderly.

2.34 Describe the skin, hair, nail and oral care necessary for an elderly patient.

2.35 List ways to assist the elderly in being well groomed.

2.36 Outline the changes in the rest and sleep habits of the elderly.

2.37 List some common changes in the elimination pattern as the body ages.

2.38 Discuss the liberal use of laxatives in the elderly and the effects these drugs might have on the body.

2.39 Explain the purpose and procedure of a bowel and bladder training program.

2.40 List the intrinsic factors which cause accidents.

2.41 List the extrinsic factors which cause accidents.

2.42 List common household accidents.

2.43 What are the most common accidents within the hospital setting?

2.44 List additional safety precautions that are required because of age, physical condition, or mental state of the individual.

2.45 Discuss the use of sedatives as restraint measures.

2.46 List the specific nutritional requirements for the aged.

2.47 Explain the reasons for malnutrition in the elderly person.

2.48 Discuss the factors that must be considered in securing food for the elderly person and how the elderly can become involved in their own selection of food.

2.49 List community resources that are available to help meet the nutritional needs of the aged.

2.50 List at least three "special diets" that are frequently forced upon the elderly because of disease processes.

2.51 List the physiological changes that alter the absorption and use of drugs in the elderly and how this affects drug dosages.

2.52 List some of the drugs commonly used by the geriatric patients and classify them into broad groups that indicate the general types of drugs most commonly used.

2.53 List some of the specific problems encountered with the administration of drugs to the elderly.

2.54 Discuss methods which can assist the elderly in taking their medication effectively and safely in the hospital and at home.

2.55 List six observations that would supply basic information to an assessment team concerning the quality of nursing care found in an extended care facility.

2.56 In planning the nursing care of an aged person, identify three activities that will promote normal physiologic functioning.

2.57 Identify developmental tasks and how the developmental process affects nursing procedures.

2.58 Assess, plan and implement a nursing plan according to the developmental level of the patient.

2.0 Psychomotor: Demonstrate adaptation of the nursing process to the care of geriatric patients.

3.0 Outline the nutritional needs for the various stages of growth and development.

3.1 List three reasons that a knowledge of nutrition is valuable to each individual.

3.2 List three reasons that a knowledge of nutrition is valuable to the health worker.

3.3 Define protoplasm, and list the approximate percentages of its six major constituents.

3.4 Describe the role of photosynthesis in the food chain.

3.5 Describe the effect of emotions upon digestion.

3.6 Describe how social and religious customs influence dietary patterns.

3.7 List the four guidelines for good nutrition.

3.8 List the four general divisions of the life span and describe the need for nutritional adaptations in these.

3.9 List five factors, beside age, that influence nutritional needs.

3.10 List three agencies in the United States that set standards for food requirements.

3.11 Describe the basic four food groups and the recommended servings from each group.

3.12 Describe how energy is released from carbohydrates.

3.13 Estimate the daily energy (caloric) requirements for a young healthy adult male and female at moderate activity.

3.14 List three factors that INCREASE caloric requirements.

3.15 List three factors that DECREASE caloric requirements.

3.16 Describe the digestion of carbohydrates.

3.17 Discuss the role of vitamins and hormones in carbohydrate metabolism.

3.18 Discuss carbohydrates in the diet: daily calories supplied and cost factor.

3.19 Describe the uses by the body of carbohydrates.

3.20 List four problems resulting from excess carbohydrate intake.

3.21 List three types of fats, giving two characteristics, three sources and one example of each.

3.22 Discuss fat digestion and absorption.

3.23 List six uses of fats by the body.

3.24 Describe four problems associated with excess fats in the diet.

3.25 Describe the digestion and absorption of proteins.

3.26 List five uses of proteins by the body.

3.27 List five good sources of animal and plant proteins.

3.28 Describe two effects of high temperatures on proteins.

3.29 Describe five disorders resulting from inadequate protein intake or utilization.

3.30 Describe the processes of digestion, absorption and metabolism from the gastrointestinal tract.

3.31 Discuss how and when vitamins were discovered.

3.32 List the letter and chemical names of the four fat-soluble vitamins.

3.33 Describe four general characteristics for fat-soluble vitamins.

3.34 List the recommended daily allowances for vitamins A and D.

3.35 Describe the general functions and sources of the four fat-soluble vitamins.

3.36 List three general characteristics of water-soluble vitamins.

3.37 List the letter and chemical names of the seven water-soluble vitamins discussed.

3.38 State vitamin deficiencies that are associated with the disorders of beri beri, pellagra, pernicious anemia and scurvy.

3.39 Describe three good sources of each of the seven vitamins discussed.

3.40 List two causes of vitamin deficiency.

3.41 List three sources of body fluids and approximate daily volumes of each.

3.42 Describe four ways fluid is lost from the body and approximate volumes excreted by each method.

3.43 Describe the three body fluid compartments and the percentage of body fluid in each one.

3.44 List six functions of fluid in the body.

3.45 Discuss the general bodily functions of the seven mineral elements listed.

3.46 List three food sources of calcium, phosphorus, iron, sodium, potassium and two sources of nutritional iodine and one source of fluorine.

3.47 Describe the recommended daily allowance of iron for the newborn, adult male, and young adult female.

3.48 Describe five physical or psychosocial factors that might interfere with good nutrition for the hospitalized patient.

3.49 Identify the common foods allowed on the following diets: clear liquid, full liquid, bland soft, mechanically soft, and regular.

3.50 Identify one condition of illness in which the following therapeutic diets might be used:

Frequent small feedings of skim milk and vegetable oil (or half and half)	Increased calories
	Decreased calories
	Fat restricted
Clear liquids	Fat controlled
Mechanically soft	Sodium restricted
Bland	Increased fluids
Low residue	Decreased fluids
Increased fiber (residue)	Elimination diet

3.51 List five ways the nurse assists in diet therapy.

3.52 List seven observations which the nurse should report or record about the patient and his diet.

3.53 Assist patients in maintaining a balance in nutrition, fluid, electrolytes, elimination, and appropriate activities for each level of growth and development.

3.54 Interview patients regarding their eating habits: Identify what they eat and drink and the times and amounts eaten.

3.55 Identify factors influencing nutritional differences, e.g., age, socioeconomic and cultural background, religion, physical status and activity.

3.56 Categorize and give a rationale for the selection of the current nutritional status of a patient.

3.57 Analyze the components of a daily diet of a patient and compare to the suggested minimum daily requirements.

3.58 Evaluate dietary substitutes considering the patient's life style, socioeconomic status, and cultural background.

3.0 Affective

3.1 Apply nursing judgments and related interventions in preventing complications arising from a disturbance in nutrition and/or growth and development.

3.2 Employ the concepts of nutrition and growth and development in patient teaching.

4.0 State the rationale for satisfying basic food needs, considering age, levels of growth and development, and socio-cultural and religious factors.

4.1 List three reasons that a knowledge of nutrition is valuable to each individual.

4.2 List three reasons that a knowledge of nutrition is valuable to the health worker.

4.3 Define protoplasm, and list the approximate percentages of its six major constituents.

4.4 Describe the role of photosynthesis in the food chain.

4.5 Describe the effect of emotions upon digestion.

4.6 Describe how social and religious customs influence dietary patterns.

4.7 List the four guidelines for good nutrition.

4.8 List the four general divisions of the life span and describe the need for nutritional adaptations in these.

4.9 List five factors, beside age, that influence nutritional needs.

4.10 List three agencies in the United States that set standards for food requirements.

4.11 Describe the basic four food groups and the recommended servings from each group.

4.12 Identify factors influencing nutritional differences, e.g., age, socioeconomic and cultural background, religion, physical status and activity.

4.13 Evaluate dietary substitutes considering the patient's life style, socioeconomic status, and cultural background.

5.0 Describe the process of communication as applied to the developmental levels.

5.1 Identify the needs of and implement the nursing process for patients based on the factors of sex, developmental levels, nutritional needs, and sociocultural background.

5.2 Identify developmental tasks and how the developmental process affects nursing procedures.

5.3 Assess, plan and implement a nursing plan according to the developmental level of the patient.

5.0 Psychomotor: Demonstrate the application of effective communication and interpersonal relationships appropriate to each level of development.

6.0 Name the common disabilities and disorders of the elderly and describe the related nursing responsibilities.

6.1 Define the terms: aged, gerontology, geriatrics, senile, senility, senescence.

6.2 Explain briefly the various aspects of the aging process referred to as: biological aging, social aging, cognitive aging, affective aging.

6.3 Differentiate between the problems of the aged and the process of aging.

6.4 List the four major categories of problems that the elderly must deal with.

6.5 List the basic human needs of all elderly people.

6.6 Discuss statistics, their causes and implications, related to the elderly, e.g., the percent of the American population over 65 years and the life expectancy today.

6.7 Express, in small groups, attitudes and feelings regarding the aged and convalescent homes.

6.8 Differentiate between catabolism and anabolism.

6.9 List the changes that take place in the various body systems due to the aging process:

musculoskeletal
excretory
respiratory
cardiovascular
digestive
endocrine
integumentary
nervous
special senses

6.10 Relate nursing principles to a given aging process.

6.11 Determine from a given list of symptoms which are due to normal aging and which might represent pathological changes.

6.12 Explain the aged person's adaptation to stress.

6.13 Given a description of an aged patient experiencing stress, list three actions that a nurse can take to support him through the experience.

6.14 State the organizations, and their functions, on a national level that are concerned with the aging.

6.15 State some problems and needs that led to the formation of these national organizations.

6.16 List the local agencies that are concerned with meeting the needs of elderly citizens.

6.17 List ways a person can prepare for retirement years--physically, psychologically, economically.

6.18 List the developmental tasks for this age group.

6.19 List the major factors that determine how well an individual adjusts to old age.

6.20 Identify the three basic psychosocial needs of the elderly.

6.21 Describe how they differ from the younger person's, how these needs are complicated by old age, and how they can be satisfactorily met.

6.22 Explain why there are at least 20% more women than men in institutions for the elderly.

6.23 Define "disengagement theory" and list the stages involved.

6.24 Outline the five stages of dying and apply them to the elderly.

6.25 List the values and effects of interage interaction.

6.26 List the causes of suicide attempts in the elderly.

6.27 Discuss the stereotyped ideas associated with sex and the older person.

6.28 List some effective ways of better communication with the elderly and give the rationale.

6.29 Outline a plan to promote involvement and socialization of the elderly.

6.30 Describe how an aged person's life can be made purposeful.

6.31 List the advantages and disadvantages of becoming aged.

6.32 Compare the positive and negative aspects of having the elderly placed in American nursing homes.

6.33 State the physical and psychosocial changes that alter the hygienic practices in the elderly.

6.34 Describe the skin, hair, nail and oral care necessary for an elderly patient.

6.35 List ways to assist the elderly in being well groomed.

6.36 Outline the changes in the rest and sleep habits of the elderly.

6.37 List some common changes in the elimination pattern as the body ages.

6.38 Discuss the liberal use of laxatives in the elderly and the effects these drugs might have on the body.

6.39 Explain the purpose and procedure of a bowel and bladder training program.

6.40 List the intrinsic factors which cause accidents.

6.41 List the extrinsic factors which cause accidents.

6.42 List common household accidents.

6.43 What are the most common accidents within the hospital setting?

6.44 List additional safety precautions that are required because of age, physical condition, or mental state of the individual.

6.45 Discuss the use of sedatives as restraint measures.

6.46 List the specific nutritional requirements for the aged.

6.47 Explain the reasons for malnutrition in the elderly person.

6.48 Discuss the factors that must be considered in securing food for the elderly person and how the elderly can become involved in their own selection of food.

6.49 List community resources that are available to help meet the nutritional needs of the aged.

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6.54 Discuss methods which can assist the elderly in taking their medication effectively and safely in the hospital and at home.

6.55 List six observations that would supply basic information to an assessment team concerning the quality of nursing care found in an extended care facility.

6.56 In planning the nursing care of an aged person, identify three activities that will promote normal physiologic functioning.

6.0 Psychomotor: Demonstrate adaptation of the nursing process to the care of geriatric patients.

7.0 Discuss the nursing process as applied to specific medical-surgical nursing problems.

7.1 Define disease.

7.2 List and describe the causes of disease.

7.3 List and explain the body's external defenses against injury and disease.

7.4 Describe the body's internal defenses against invasion by pathogens: the inflammatory response and the antigen-antibody response.

7.5 Review the healing process.

7.6 List and demonstrate an understanding of the principles that make possible the invasion of human beings by pathogens.

7.7 Define the following:

cellulitis	abscess	necrosis	toxoid
peritonitis	sinus	leukocytosis	vaccine
pyemia	furuncle	phagocytosis	toxin
septicemia	toxemia	exudate	keloid
fistula	empyeme	Betadine	adhesion
carbuncle	pneumothorax	active immunity	gangrene
hemotoma	Dakin's Solution	passive immunity	contusion

7.8 Review how the application of heat affects the inflammatory process.

7.9 Review the factors that determine the severity of an infection.

7.10 Discuss the organisms that most frequently infect wounds.

7.11 Review the ways in which an infection can spread through the body.

7.12 Discuss the rationale for the use of corticosteroids in the treatment of an inflammation.

7.13 Explain the body's allergic response and discuss the drugs and their actions that are used to control this response.

7.14 Discuss anaphylactic shock.

7.15 Describe the following tests and the nursing responsibilities involved in each test:

urinalysis	typing and crossmatching
CBC	sedimentation rate
SMA 12	throat culture
VDRL	stool specimen
chest x-ray	gastric analysis
blood chemistries	24 hour urine
Hgb. and Hct.	

7.16 Give the normal values of the following tests:

RBC	hemoglobin
WBC	differential
hematocrit	urinalysis

7.17 Explain the purpose of a differential WBC.

7.18 Review the following procedures:

gastric analysis	EKG
EEG	spinal tap (LP)

7.19 Name two categories of drugs classified as anti-infectives.

7.20 List at least ten anti-infectives and include their action, usual dose, method of administration and special precautions.

7.21 Describe physiological alterations occurring in the system as a result of general anesthesia.

7.22 Identify safety factors, bacteriological, psychological and physical, related to intra-operative care of the patient.

7.23 Differentiate between an anesthetist and an anesthesiologist.

7.24 Describe fears and anxieties patients may have related to anesthesia.

7.25 Know the stages of general anesthesia.

7.26 Define needs of the patient about to have surgery.

7.27 List the nursing responsibilities associated with the preoperative care of the patient.

7.28 Complete a preoperative check list from any of the hospitals in Fresno.

7.29 Identify safety factors related to preoperative care.

7.30 Identify clues the patient gives that indicate his fears of having surgery performed.

7.31 Discuss pertinent information that should appear in the nurse's notes of a patient going to surgery.

7.32 Describe a fear that the following individuals may have:

a. a 40 year old truck driver scheduled for back surgery
b. a 75 year old male scheduled for leg amputation
c. a 24 year old female scheduled for a hysterectomy
d. a 15 year old scheduled for a Caesarian section
e. a 36 year old female scheduled for a mastectomy
f. a 14 year old male scheduled for leg amputation because of cancer

7.33 Describe laboratory tests required prior to the performance of surgery.

7.34 Identify laboratory findings and/or observations that need to be reported to the physician and which might cause cancellation of the surgery.

7.35 List the desired effect and the possible undesirable actions that might occur from the preoperative drugs. (Check the physician's order sheet in the clinical lab to learn the names of the drugs commonly administered prior to surgery.)

7.36 Demonstrate a beginning understanding of why atropine is contra-indicated in patients with glaucoma.

7.37 Explain why the nurse cannot draw up Demerol and Seconal in the same syringe.

7.38 Describe legal implications of nursing responsibilities associated with the patient scheduled for surgery.

7.39 List common postoperative complications and nursing measures aimed at preventing them.

7.40 Describe three expected behaviors of patients in the two to three hour period following surgery with general anesthesia or spinal anesthesia.

7.41 Explain the purpose of applying elastic bandages or stockings to a patient's legs following surgery.

7.42 Explain why the post-surgery patient is not positioned with the knee-gatch portion of the bed raised, or with pillows under the knees.

7.43 List observations that would make you suspect a patient was bleeding or going into shock.

7.44 Identify nursing measures used to:

control pain
control nausea
promote rest and sleep
avoid constipation

prevent complications
- circulatory
- respiratory
- urinary
- gastro-intestinal
- wound
- psychological

7.45 Identify two drugs used for each of the complications listed in the above objective (7.44). Give the usual dose, action, method of administration and special precautions, if any.

7.46 Identify and verbalize provision of care using the nursing process.

7.47 Verbalize or give written data demonstrating a beginning ability to collect information for a nursing assessment.

7.48 Complete the steps of the nursing process by:

a. Planning: set goals and establish priorities; select alternatives and prescribe nursing activities.
b. Implementing: provide personalized implementation and coordinate actions with other team members.
c. Evaluating: observe patient's verbal and nonverbal responses.
d. Modifying: re-enter process at appropriate phase.

7.49 Verbalize how a patient's body defense systems are functioning.

7.50 When caring for a patient with an infection, identify the organism causing the infection, factors determining the severity of the infection, symptoms and lab results identifying the infection, and the treatment the patient is receiving.

7.51 State reasons for altered values in each of the following lab tests on a given patient: RBC, WBC, hematocrit, hemoglobin, differential, urinalysis.

7.52 In caring for a patient who is planning to have surgery, identify the special needs of that patient and provide the appropriate teaching and preoperative care.

7.53 Complete a preoperative check list from either St. Agnes Medical Center or Fresno Community Hospital.

7.54 Identify safety factors related to the preoperative care the student is giving to the patient.

7.0 Psychomotor: Assist with preoperative and postoperative patient care.

7.1 Demonstrate explaining to a patient how to move a bed, ambulate, deep breathe and cough after surgery.

7.2 Administer preoperative medications according to all of the principles of safety learned in Nursing 1, and verbalize the specific action of each medication.

7.3 Perform, with minimal guidance, preoperative activities which are the responsibility of the nurse.

7.4 Perform nursing measures used to:

a. control nausea
b. control pain
c. promote rest and sleep
d. avoid constipation
e. prevent complications: circulatory, respiratory, urinary, gastrointestinal, wound, psychological

7.5 Demonstrate changing surgical dressings following the principles of surgical asepsis.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Nursing 5 and 6: Maternity Nursing

Elements of Required Mastery (Cognitive/Affective/Psychomotor)

1.0 Cognitive: Identify factors in the sexual roles that affect family planning, fertility, conception and fetal and maternal risk.

1.1 Orientation to maternity nursing.

a. The changing role of the maternity nurse.
b. The nursing process applied to maternity nursing.

1.2 Families and maternity nursing.

a. Contemporary family styles.
b. Individual differences and maternity care.

1.3 Childbearing and child rearing.

a. Factors in family planning.
b. Infertility.
c. Abortion.
d. Genetic counseling.
e. Psychosocial and cultural factors in family planning.
f. Control of conception.

1.4 "Obstetrics" and "maternity care."

1.5 Explain how the concept of "wellness" relates to professional maternity nursing.

1.6 Explain the significance of the expanding family in our society as it relates to maternity nursing.

1.7 Explain the importance of vital statistics and the birth certificate.

1.8 Explain maternal mortality and list the factors responsible for its reduction.

1.9 Paraphrase the definition for infant mortality and list some factors that cause it.

1.10 Explain the present professional role of the "nurse-midwife" and explain how this role has developed.

1.11 Examine the current attitude toward sex education.

1.12 List health problems for which sex education can be considered a primary preventive tool, when viewed in the broad perspective.

1.13 Outline ways that the home, school, church, and childbearing community organizations can contribute to promoting a healthy attitude toward sexuality.

1.14 Describe several contemporary and social changes which are listed as urgent reasons to limit population growth.

1.15 Describe religious and political issues that affect family planning and implementation of services that help individuals who wish to limit family size.

1.16 Describe the services offered by family planning groups other than contraceptive information.

1.17 Describe the prevailing attitudes in your community regarding family planning services. How do these attitudes affect the provision of services?

1.18 Contrast and compare the contraceptive methods presently available.

1.19 Discuss the role of the nurse in conception control.

1.20 Describe the benefits of conception control.

1.21 Discuss factors that influence the method of conception control selected by an individual or recommended by her physician.

1.22 Review the various types of abortion. Does the term mean the same to the lay person as it does to the professional?

1.23 Describe at least three ways a patient who either wants information about or wants an actual abortion could receive help in Fresno.

1.24 Describe the role of the nurse in caring for a woman having an abortion.

1.25 Explain the current trend regarding laws in the U.S. as related to elective abortions. In California?

1.26 Describe the religious and moral implications of elective abortion and how they can affect the care a patient receives.

1.27 Describe the various types of elective abortions and what each entails.

1.28 Describe the prevalence of unwed parents in different age groups: i.e., 15-19, 20-24, etc.

1.29 Describe the prevailing attitude toward unmarried parents by the health professionals and by the lay public.

1.30 Describe how the nurse's attitudes about premarital sexuality and the occurrence of pregnancy out of wedlock may be related to the quality of care and the assistance offered to unwed parents.

1.31 Describe the characteristic reactions to the fact of a premarital pregnancy when it becomes known.

1.32 Describe the issues involved in the choices an unwed mother has as to whether or not to keep the expected baby, marry, etc.

1.33 Summarize available findings about the legal responsibilities and problems of unwed fatherhood.

1.34 Describe the preventive and remedial services available in Fresno for the unwed parent.

1.35 Describe the nurse's role in caring for the unwed mother as compared to that of the married pregnant woman.

1.36 Differentiate between infertility and sterility.

1.37 State several predisposing factors to sterility and infertility.

1.38 Identify measures used in identifying male or female sterility or infertility.

1.39 Describe the role of the nurse in working with couples with impaired fertility.

1.40 Describe the alternatives available to the couple with impaired fertility who desire children.

1.41 Describe measures which would reduce infertility.

1.42 Describe methods of treatment which may improve fertility.

1.43 Discuss the purpose of genetic counseling.

1.44 Identify the most common types of genetic disorders.

1.45 Identify an agency to which the nurse can refer a patient with a suspected genetic problem.

2.0 Describe the role of the nurse in counseling and referral with families planning for children and in dealing with the pregnant woman.

2.1 Methods of teaching and counseling.

2.2 Activities during pregnancy; high risk pregnancy.

2.3 Preparation for childbirth; emotional considerations for the pregnant family.

3.0 Discuss the phenomena of normal family-centered labor and delivery.

3.1 Labor and delivery.

a. The stages of labor.
b. High risk labor and delivery.
c. Emergency and home delivery.

3.2 State the purposes and average length of time for each stage of labor and the muscle groups involved.

3.3 Understand the physiological changes causing discomfort during labor and what factors modify the degree of discomfort experienced.

3.4 Discuss the use of hypnosis and "natural childbirth" methods of labor management.

3.5 List the actions of the narcotics, tranquilizers, and barbiturates commonly used for analgesia during labor.

3.6 Explain the technique used, the advantages and disadvantages both to the mother and fetus of the following:

Regional anesthesia and analgesia
- local infiltration
- pudental block
- paracervical block
- caudal anesthesia
- spinal anethesia

General anesthesia
- nitrous oxide
- Trilene
- cyclopropane

3.7 Explain the meaning of "lightening" as it refers to alterations occurring late in pregnancy.

3.8 List and compare the symptoms of "true" and "false" pregnancy.

3.9 Explain the significance and physiologic cause of "show" and the rupturing of the membranes.

3.10 List three theories that relate to the initiation of the labor process.

3.11 Explain uterine contractions in terms of the function they perform and their relationship to each other.

3.12 Paraphrase the definition of each of the three stages of labor, describing what is accomplished in each stage and explain the forces that are involved.

3.13 Explain and describe what is happening to the fetus during descent and engagement.

3.14 Explain and describe the mechanisms of labor as they refer to flexion, internal rotation, extension and external rotation.

3.15 Paraphrase the definition of "station" and indicate the progress of the fetus in relation to this definition.

3.16 List four signs of placental separation.

3.17 Explain the difference between Schultze's mechanism and Duncan's mechanism.

3.18 Explain the importance of a positive nurse-patient relationship during labor and delivery and specific measures the nurse can utilize to build this relationship.

3.19 Discuss the nursing techniques used with the mother in labor.

3.20 Explain the information gained from and the procedure for the rectal and vaginal examination during labor.

3.21 Explain the symptoms, both behavioral and physical, of the three stages of the labor process and the nurse's responsibilities during each stage.

3.22 Define mechanical dystocia and give the three forces involved in labor.

3.23 List the main causes and types of uterine dysfunction (inertia) and the complications that may result.

3.24 Describe the treatment for each type of uterine dysfunction and discuss the nursing responsibilities.

3.25 List the abnormal fetal positions, possible dangers involved and how each may be remedied.

3.26 Give evidence of understanding CPD (cephalopelvic disproportion), its causes and consequences.

3.27 Discuss postpartal hemorrhage, causes, treatment and nursing responsibilities.

3.28 Define uterine rupture, listing contributing causes and treatment.

3.29 Define amniotic fluid embolism listing causes, symptoms, and treatment.

3.30 Give evidence of understanding the symptoms of prolapse of the umbilical cord, the dangers involved and the treatment that is indicated.

3.31 Explain the causes of inversion of the uterus.

3.32 Discuss the developmental changes in multiple pregnancies, differentiating between identical and fraternal twins.

3.33 Explain why the patient with a multiple pregnancy is a greater risk during labor and delivery.

3.34 List and discuss the four main types of obstetric forceps.

3.35 Discuss both maternal and fetal indications for the use of forceps.

3.36 Define low, mid, and high forceps.

3.37 Define version and discuss the three main types.

3.38 Give evidence of understanding the indications for a Caeserian Section, the type most usually done, and the nursing care involved.

3.39 Discuss indications for induction of labor, techniques used and the nursing responsibilities involved.

3.40 Describe the preparations necessary for a home delivery.

3.41 Describe the nurse's responsibilities in the event of a delivery during a disaster.

3.42 Explain the nursing priorities of both the mother and the infant and the rationales for each.

3.0 Psychomotor: Demonstrate at least five specific actions a nurse can take to assist a mother during labor to minimize fear, pain, discomfort (e.g., breathing exercises).

4.0 Outline the nursing responsibilities in antepartum care, labor and delivery, postpartum care and care of the newborn.

4.1 Describe how the nurse assists both the physician and the patient during the obstetric examination.

4.2 Psychological and socioeconomic implications of childbearing complications; postpartum care of the high risk mother.

4.3 Given a list of ten signs and symptoms of pregancy, differentiate between probable and positive signs and symptoms. State in which trimester these may occur.

4.4 Given a list of ten minor discomforts of pregnancy, describe the cause and one specific nursing measure for each.

4.5 Calculate the expected date of delivery according to Nagle's rule.

4.6 State the purpose of laboratory tests commonly done during the antepartum period.

4.7 Identify emotional changes and stress factors present during a normal pregnancy.

4.8 Describe the responsibilities of the nurse during antepartal care regarding:

a. danger signals of pregnancy
b. signs of approaching labor
c. when to go to the hospital and what to take
d. selection of clothing for expectant mothers
e. selection of layette and nursery equipment
f. inclusion of family members

4.9 Describe signs and symptoms of pre-eclampsia and give reasons for each.

4.10 Define acute toxemia and differentiate between pre-eclampsia and eclampsia.

4.11 Given a patient with toxemia (real or hypothetical) and a list of nursing actions, select those that would prevent aggravation of the symptoms and include the rationale for each.

4.12 Name and describe common lab tests on normal newborns to detect possible complications.

PKU (Phenolketonuria)	Rh factor/Coombs
ABO incompatibility	Bilirubin
Hg.	P.C.U.

4.13 Given a patient in labor with any one of the following symptoms or conditions, describe the major immediate danger and state at least one nursing action and related rationale.

precipitate labor	prolapsed cord
tetanic contractions	transverse lie
Bandl's ring	

4.14 Describe three signs of postpartum hemorrhage and list three observations and/or preventive nursing actions.

4.15 Compare signs and symptoms of abruptio placenta and placenta previa.

4.16 Communicate with a new mother about her baby.

4.17 Identify and/or describe what is meant by presentation, position and Leopold's maneuvers.

4.18 Identify and/or describe the mechanism of labor.

4.19 Identify the anatomical and physiological changes that take place following childbirth and the related postpartum discomforts and the nursing procedures to relieve them.

4.20 Identify complications in the puerperal mother.

4.21 Identify and/or describe two ways in which labor may be induced.

4.22 Childrearing and the nursing process.

a. The physiological basis of neonatal nursing.
b. Physical examination of the newborn.
c. Care of high risk infants and their families.
d. Intrauterine growth deviations.

4.23 Discuss hydatiform mole, symptoms and treatment.

4.24 Give evidence of understanding how the following diseases may complicate or be complicated by pregnancy:

anemia
cardiac problem
urinary tract infection
infectious diseases
diabetes mellitus

4.25 Discuss fetal problems that could arise from the problems listed in item 4.24.

4.26 Discuss fetal problems in situations where pre-eclampsia or eclampsis is present. Or diabetes mellitus.

4.27 Discuss the technique of and uses for the following methods of fetal diagnosis:

maternal blood studies
fetal ECG
doppler probe
fetal phonocardiography
ultrasonography

4.28 List and discuss the types of x-ray studies that can be done to aid in fetal diagnosis.

4.29 Explain how an amniocentesis is done and the usual evaluations that are made.

4.30 Discuss the value of fetal blood studies.

4.31 Discuss the four main endocrine studies that are helpful in fetal diagnosis.

4.32 Counsel a pregnant woman about her general hygiene needs during pregnancy.

4.33 Identify the suspected cause of the following "minor discomforts" of pregnancy and discuss ways of alleviating the discomforts:

frequent urination	varicose veins
constipation	flatulence
nausea	hemorrhoids
backache	cramps
dyspnea	edema
heartburn	vaginal discharge

4.34 List drugs used during an uncomplicated pregnancy, their purpose and action.

4.35 Explain the difference between the "funic souffle" and the "uterine souffle."

4.36 Describe the tests, examinations, etc. the obstetrician will do in providing prenatal care.

4.37 Describe the muscular structure of the uterus and review the changes that occur during pregnancy. Use the terms "hyperplasia" and "hypertrophy."

4.38 Explain the phonemenon of "lightening."

4.39 Describe the physiological changes known as "Chadwick's" sign.

4.40 Describe "stride gravidarum" and explain the causal factors.

4.41 Explain the significance and cause of weight gain during pregnancy. Indicate during which of the trimesters of pregnancy the weight gain should occur.

4.42 Discuss the function of the placenta as an endocrine organ and list the hormones it produces.

4.43 List the hormones produced by the pituitary gland that have significance specifically during pregnancy. Indicate their actions.

4.44 List the presumptive, probable and positive signs of pregnancy.

4.45 Explain the methods of doing pregnancy tests and describe the advantages of the immunologic tests.

4.46 Explain the technique and uses of the following methods of fetal diagnosis: maternal blood studies, fetal ECG, fetal phonocardiography, doppler probe.

4.47 List and explain the types of x-ray studies that can be done to aid in fetal diagnosis.

4.48 Explain how an amniocentesis is done and list the usual evaluations that are made.

4.49 Explain the value of fetal blood studies.

4.50 Explain the four main endocrine studies that are helpful in fetal diagnosis.

4.51 Explain acute fetal distress, its symptoms and its relationship to the various underlying pathological conditions.

4.52 Explain how to diagnose and care for the mother and fetus with hemolytic disease.

4.53 Explain the maternal and fetal problems of the patient who has diabetes mellitus.

4.54 Explain post-maturity, its diagnosis and treatment.

4.55 Explain the fetal problems which occur in situations where the mother has pre-eclampsia, eclampsia, chronic hypertension and infections that effect the fetus.

4.56 Explain immediate post partal care, both physical and psychological, given to the new mother.

4.57 Explain the immediate care of the infant in the delivery room including suctioning, care of the cord, care of the eyes, hypoprothrombenemia prophylaxis and identification.

4.58 Explain the Apgar rating system.

4.59 Paraphase the definition of the three classifications of perineal lacerations.

4.60 Paraphrase the definition of "episiotomy" and list the advantages of this procedure.

4.61 Explain "teaching" and "learning" as they apply to health teaching for the expentant mother and the new mother.

4.62 Explain the purposes, theories, and instructional content of the various programs of education for childbirth.

4.63 Discuss the components of discharge teaching by the nurse.

4.64 Define puerperal infection and discuss causative factors and preventive measures.

4.65 List and discuss the two main types of puerperal infection.

4.66 Consider the following conditions: lesions of the perineum, vulva and vagina; endometritis; pelvic cellulitis or parametritis.

4.67 Consider thrombophletitis and its causes, treatment and nursing care. Define femoral thrombophletitis and discuss care of the patient.

4.68 Define peritonitis and discuss appropriate signs and symptoms, treatment and nursing care.

4.69 Read the assigned pages and study carefully the signs, symptoms, treatment and nursing care for the following complications:

pulmonary embolism	vulvular hematomas
subinvolution of the uterus	disorders of the breast
hemorrhage	bladder complications

4.70 Delineate the nurse's role in the monitoring of patients for the previously listed complications. Take into consideration danger signs and symptoms which the nurse should be aware of and alert for during the care of the patient.

4.71 Review in your resource texts the signs, symptoms and treatment for shock--hypovolemic and septic shock. The signs for these closely resemble the signs and symptoms of hemorrhage and puerperal infection.

4.72 Be ready to plan a routine of care for the patient in the following:

a. breast care
b. lactation
c. perineal care--both by the nurse, and self-care by the patient
d. perineal discomfort--the use of sitz bath and the heat lamp

4.73 Know the clinical aspects and be aware of the importance of:

a. early ambulation
b. temperature changes during postpartum
c. changes in the pulse during postpartum
d. the significance of after-pains
e. characteristics of digestion and the normal loss of weight
f. the factors related to increased kidney output
g. the importance of "night sweats" to the postpartum patient
h. the approximate time menstruation will begin

4.74 When will you tell the mother to report for her postpartum and follow-up examinations and why?

4.75 Be ready to discuss the components of optimal maternal care for the new mother.

4.76 Discuss the significance of the term, "high-level wellness" to the care of the new mother and her family.

4.77 Discuss factors important to the normal puerperal course such as sleep, food and psychological adjustment.

4.78 Differentiate between the taking-in phase and the taking-hold phase and give an example of each.

4.79 What are postpartal blues?

4.80 Discuss the process of involution.

4.81 Describe the progress of involution of the uterus and give an average number of days into which the progressive stages would fit.

4.82 Be ready to discuss the changes in the cervix during the immediate postpartum period.

4.83 Define the term "lochia" and describe the three kinds found in postpartum--rubra,serosa, alba. Indicate the length of time each type of lochia would be expected to last.

4.84 Be aware of the specific characteristics of the lochia which should be reported to the physician. Characteristics such as: color, type, amount of flow.

4.85 Characterize the changes (involutional) which occur in the pelvis and the structures in the abdominal wall during postpartum.

4.86 Discuss the changes which occur in the breasts, postpartum, for both the lactating and nonlactating mother.

4.87 Describe the following structures, organs and glands in their normal nonpregnant, antepartal and postpartal states: uterus, vagina, fallopian tubes, ovaries, abdominal wall, breasts, urinary system, circulatory system, digestive system, respiratory system and skin.

4.88 Explain the relationship between the four bones of the female pelvis and their importance in obstetrics.

4.89 Explain the reasons for pelvic variations.

4.90 Explain the importance of the relationship between the pelvic measurements "C.V." and "C.D." and state the normal difference in cm.

4.91 Paraphrase the definition for menarche, ovulation, menstruation, graafian follicle and corpus luteum.

4.92 Explain the menstrual cycle and the role the various hormones play in controlling the cycle.

4.93 Explain the significance of the basal body temperature and the use of the temperature graph.

4.94 Explain the process of ovum and sperm maturation and fertilization.

4.95 Recall Naegle's rule and calculate the EDC given the date of the first day of the last menstrual period.

4.96 Explain the importance of x and y chromosomes.

4.97 Describe the changing process of nourishment of the implanted ovum and developing fetus.

4.98 List by lunar months the important developmental changes of the fetus.

4.99 Explain the importance of the fetal head, describing sutures, fontanels and molding.

4.100 Explain the unique aspects of fetal circulation and the changes that take place at birth.

4.101 List the three different presentations of the fetus and explain the variations of each one.

4.102 Describe the positions of the presenting part of the fetus in relations to the mother's pelvis.

4.103 Recall which is the most preferred position.

4.104 List the four ways in which a diagnosis of fetal position is made.

4.105 Explain the relationship between the location of fetal heart sounds and the fetal position; given the location of the fetal heart tones, identify the most likely position of the fetus.

4.0 Psychomotor

4.1 Demonstrate pertinent and accurate charting on the patient's record.

4.2 Delineate the relationship of the height of the fundus to the progress of involution.

5.0 Identify community resources available to families during the childbearing cycle in order to provide continuity of care.

5.1 Postpartum needs of the family.

5.2 Significant others in childrearing.

6.0 Identify the psychosocial needs of the mother, neonate and family during the childbearing cycle, and psychosocial changes during pregnancy and antepartum management.

7.0 Use knowledge of pharmacology to safely administer medications to the maternal and neonatal patient.

7.1 Differentiate between the purposes of anesthesia and analgesia for the first two stages of labor.

7.2 Identify at least eight drugs found on the blue work sheet and describe when they are used and how they act.

7.3 Discuss routine drugs in the puerperium.

7.0 Psychomotor: Administer safely medications to the maternal and neonatal patient.

8.0 Identify pathological interruptions during the childbearing cycle.

8.1 State two of the most common causes of uterine bleeding during the first half of pregnancy and two causes in the second half.

8.2 Given patients with any of the following disease conditions, describe at least one effect each would have on the course of pregnancy and the possible fetal condition at birth and identify at least one implied nursing action during the antepartum, labor, delivery, and postpartum periods.

diabetes
hypertension
asthma
rheumatic heart disease
rubella
peripheral vascular disease
mental illness

8.3 Define toxemia, discuss theories regarding its causes and prevention, and give evidence of understanding the classification of texemias.

8.4 Define pre-eclampsis, list signs and symptoms and discuss the treatment and nursing care for the patient with pre-eclampsia.

8.5 Define eclampsia, list signs and symptoms and discuss the prognosis, principles of treatment and nursing care for the patient with eclampsia.

8.6 Define the following types of abortion:

spontaneous	incomplete	therapeutic
induced	complete	criminal
threatened	missed	elective
inevitable	habitual	

8.7 Discuss causes, treatment and nursing responsibilities associated with abortions.

8.8 Consider implications for both mother and fetus and discuss symptomology and treatment of the following:

Chronic hypertensive vascular disease	Placenta previa
Incompetent cervical os	Abruptio placenta
Ectopic pregnancy	Hyperemesis gravidarum

9.0 Apply knowledge of nutrition and diet therapy to the needs of the maternal and neonatal patient.

9.1 Nutrition during pregnancy and the postpartum period.

9.2 Be ready to discuss the advantages and disadvantages of breast feeding and bottle feeding.

9.3 Be ready to discuss the mechanics of breast feeding--secretion of milk, engorgement, initiation, alternate massage, orientation of the infant, care of the nipples, length of nursing time, and expression of milk.

9.4 Explain the specific dietary needs of the pregnant woman as they relate to the four food groups: dairy foods, meat group, fruits and vegetables and breads and cereals.

9.5 Discuss the importance of weight control and list specific suggestions the nurse would give a pregnant woman who has a problem with excessive weight gain.

9.0 Psychomotor

9.1 Demonstrate teaching and assisting a new mother how to breast feed her baby.

9.2 Demonstrate teaching a new mother how to feed her baby formula.

10.0 Know nursing procedures and the safety precautions in their use to effectively care for the maternal and neonatal patients.

10.1 Discuss the immediate care of the postpartum patient such as:

a. vital signs and suitable times to do so
b. checking the fundus and suitable times to do so
c. checking the lochia and suitable times to do so
d. inversion of the uterus and one preventive measure
e. avoidance of overmassage of the uterus and rationale

10.2 Be ready to practice the aspects of physical care such as:

a. temperature, pulse and respiration, and provide the rationale
b. nutrition, and be ready to teach the mother important aspects
c. rest and sleep, and the rationale for providing it
d. early ambulation, bathing, urinary elimination
e. urinary catheterization (REVIEW THE PROCEDURE)
f. intestional elimination

10.0 Psychomotor: Employ nursing procedures safely and effectively in caring for maternal and neonatal patients.

10.1 Demonstrate (or role play) admitting a patient to labor and include the following:

a. establishing rapport
b. making observations
c. orienting the mother-to-be

10.2 Demonstrate the technique of a perineal prep on a patient in labor.

10.3 Demonstrate timing and recording uterine contractions including duration, intensity, and frequency.

10.4 Demonstrate setting up a sterile instrument table for the delivery room keeping each item on the table sterile.

10.5 Demonstrate the technique of counting fetal heart rate on a mother-to-be and state the point at which slowing of fetal heart rate changes from physiologic bradycardia to fetal distress.

10.6 Demonstrate catheterizing a patient in labor according to the principles of asepsis.

10.7 Demonstrate, or role play, teaching a patient to "bear down" effectively.

10.8 Demonstrate giving perineal care.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Nursing 7A, B and 8A, B: Nursing of Adults and Children

Elements of Required Mastery (Cognitive/Affective/Psychomotor)

1.0 Cognitive: Identify and meet the nursing needs of the patient based on sex, developmental level, socio-cultural background and type of illness. Identify the role of the family and environment in the patient's illness and potential for wellness.

1.1 Identify the interrelatedness of emotions and organic illness.

1.2 Define the important points of teaching in the rehabilitation of the patient who has a colostomy. Include proper timing of such teaching.

1.3 Identify agencies and clubs that offer rehabilitative services to the patient with a colostomy.

1.4 Discuss patients' feelings regarding a "change of image". Explore his/her own feelings regarding colostomies.

1.5 Discuss age, chronicity and pain as major demoralizing features associated with PVD.

1.6 Recognize the emotional impact on the patient and his family when a chronic, progressive disease is the diagnosis.

1.7 Recognize that the injured or ill person hopes not only to become healed but to regain the ability to be productive and useful.

1.8 Discuss information needed by the diabetic patient.

1.9 Identify phases of growth and development as a basis for expected behaviors as well as mental mechanisms and at what point they become part of the disturbed pattern of behavior.

1.10 Understand and explain various levels of growth and development, giving appropriate nursing care in all aspects of the child's illness.

1.11 Understand the nurse's supportive role to the patient and parents.

1.12 Recognize and evaluate a child's response to illness, hospitalization and separation.

1.13 Demonstrate understanding of the physical and psychological problems related to the care of patients with learning problems.

1.14 Understand management therapy.

1.15 Understand the dynamics of occupational, recreational and physical therapies.

1.0 Psychomotor

1.1 Be able to converse with patients without adding to the patient's stress.

1.2 Provide the patient with basic information for safe home care.

1.3 Communicate appropriately with the blind or deaf patient.

1.4 Utilize nursing skills in health teaching and rehabilitative care of patients.

1.5 Recognize the need for health teaching of the patient and his family in a chronic, long-standing disorder such as diabetes.

1.6 Assist the mother by teaching good health care of the newborn.

1.7 Observe the child's physical and emotional response to illness, hospitalization and separation anxieties.

1.8 Observe variations in growth and development.

1.9 Assist and instruct the mother in proper feeding methods.

1.10 Apply the nurse's supportive role to the patient and parents.

1.11 Assist laboratory technician with PKU and special blood tests.

1.12 Demonstrate insight into the patient's response to the emotional and social impact of mental illness.

1.13 Investigate, discuss and explore community agencies which contribute to the patient's return to a productive and satisfying way of life. This involves the patient's change in self-image and his relationship to his environment.

1.14 Provide for continuity of care--teaching and referrals (extended care facilities, "care homes," "half-way houses").

1.15 Participate in management therapy.

1.16 Participate in occupational, recreational and physical therapies.

1.17 Fulfill his responsibilities in caring for a patient in isolation or reverse isolation.

Nursing 7A, B and 8A, B: Required Mastery (Continued)

1.0 Affective

1.1 Accept the interrelatedness of emotions and organic illness.

1.2 Appreciate the behavior of an individual based on knowledge of growth and development.

2.0 Cognitive: Increase his/her skill in the use of the problem solving method of meeting patient needs.

2.1 Utilize and respond appropriately to subjective and objective observations of a given patient.

2.2 Provide the appropriate type of comfort measures required by a given patient.

2.3 Determine a logical sequence of care for each patient and organize nursing care accordingly.

2.4 Define the symptomology associated with the patient who has developed a fat embolus.

2.5 Identify the type of fracture usually associated with development of a fat embolus.

2.6 Describe behavior of the patient and the symptoms which suggest increased intracranial pressure.

2.7 Identify the types of observations the nurse makes in assisting the physician to arrive at a diagnosis of a neurological problem.

2.8 List important observations that the nurse should make regarding a convulsive seizure.

2.9 Recognize convulsions as a major symptom exhibited in a great number of CNS problems.

2.10 List complications of intravenous fluid therapy and describe signs and symptoms of the complications.

2.11 Determine if patient with fluid and electrolyte losses is receiving replacements and develop, assist or maintain a plan for replacement (forcing fluids, maintaining I.V.'s or electrolytes).

2.12 Explain the care and needs of the patient with intractable pain.

2.13 Recognize the importance of a clear airway and the priority it is afforded even in urgent situations such as when an individual is hemorrhaging.

2.14 Understand the psychological needs of the patient with handicaps involving the senses and administer appropriate nursing care.

2.0 Psychomotor

2.1 Provide nursing care and positioning which alleviates or prevents pain and spasms.

2.2 Provide further damage with any neuro-muscular or skeletal injury.

2.3 Prevent the complications due to immobility.

2.4 Assist in the rehabilitation of patients by providing range of motion exercises.

2.5 Provide care which will prevent edema and infection.

2.6 Teach the patient foot care.

2.7 Identify special needs of the patient with an amputation, paralysis, convulsions or state of unconsciousness and provide the appropriate nursing care.

2.8 Apply principles of crutch walking when assisting patients.

2.9 Teach the patient ADL.

2.10 Promote normal elimination by considering regularity, diet, activity, fluids, medication, etc., depending upon the needs of the patient.

2.11 Modify the patient's environment according to his need.

2.12 Take measures to provide a safe and therapeutic environment for the patient with mental illness.

2.13 Attendance in "doctor's rounds."

2.14 Become proficient in the use of the problem solving approach in verbal interventions, thereby guiding a patient toward more healthy means of living.

2.15 Identify need for dietary changes necessitated by body alterations such as edema, pathology of the GI tract, cardiac insufficiency and systemic infection.

2.16 Alleviate pain and/or dizziness.

2.17 Provide the patient with adequate pain-free rest.

2.18 Initiate nursing measures appropriate to the patient's ventilation problem (suctioning, positioning, O_2, notifying the physician).

2.19 Provide emotional support to the blind or deaf patient.

2.20 Prevent exertion and straining.

3.0 Cognitive: Perform nursing procedures in a safe manner and seek assistance when performing new procedures and meeting new experiences.

3.1 Provide for patient safety.

3.2 Apply and maintain principles of aseptic technic.

3.3 Interpret and follow physician's orders correctly.

3.4 Discuss electrical hazards and the use of monitoring devices.

3.5 Understand the rationale behind modification of adult dosages of medications when giving them to a child.

3.6 Recognize the responsibilities of the nurse in cardio-pulmonary resuscitation.

3.0 Psychomotor

3.1 Utilize nursing equipment appropriately and safely.

3.2 Consider the safety of the patient when he is in a cast, traction, Stryker frame, Foster frame or CircOlectric bed.

3.4 Demonstrate competency in instructing patients in self-administration of insulin and in testing of urine.

3.5 The student will care for patients with neurological problems such as the unconscious patient.

3.6 Compute and administer correct pediatric dosages of medications.

3.7 Learn to care for the normal newborn: bathing; admission to nursery; discharge to mother.

3.8 Learn feeding techniques: feeding formula; assisting mothers with breast and bottle feedings.

3.9 Fulfill the nursing responsibilities when assisting the physician with procedures such as thoracentesis and tracheostomy.

3.10 Provide adequate O_2 and CO_2 exchange.

3.11 Provide for adequate rest for the patient who has fatigue and weakness.

3.12 Prevent accidents or injuries.

4.0 Cognitive: Demonstrate appropriate and acceptable behaviors related to initiative, judgment, responsibility and adaptability in the management of patient care.

4.1 Demonstrate appropriate interpersonal relationship skills and ethical behaviors.

4.2 Follow appropriate lines of authority in the hospital. Learn the role of:

psychiatrist	psychiatric nurse
psychoanalyst	psychiatric technician
clinical psychologist	psychiatric aide
psychiatric social worker	occupational therapist
	public health nurse

4.3 Identify and explain patterns of behavior which deviate from accepted norms by utilizing effective communication and interpersonal relationships.

4.4 Have a knowledge of the legal implications involved in the care and treatment of the mentally ill.

4.5 Define the nursing responsibilities in caring for the unconscious patient.

4.6 Define the nursing responsibilities in caring for patients with orthopedic problems.

4.7 Describe the role of the nurse in blood gas monitoring.

4.8 Define the teaching responsibilities of the nurse toward the diabetic patient.

5.0 Interpret the results of diagnostic and therapeutic laboratory measures and render appropriate nursing care based on these findings.

5.1 Record and report pertinent information and observations using appropriate terminology in an accurate, complete and concise manner.

5.2 Demonstrate an understanding of diagnostic tests and laboratory tests.

5.3 Recognize the meaning of laboratory test results and use problem solving approach in utilizing this information in planning patient care.

5.4 Understand:

a. Admitting--basis for assignment to a specific unit
b. E.C.T.
c. E.E.G.
d. Routine laboratory tests--to detect endocrine disturbances or other physiological disturbances significant in mental illness
e. Psychological testing for evaluation and placement

5.5 Interpret diagnostic tests and procedures such as bone marrow aspiration, bleeding time, clotting time, prothrombin time, Schilling test, transfusion, chemotherapy, iron therapy.

5.6 Describe the various neurological examinations and diagnostic procedures utilized by the physician in determining neurological alterations.

5.7 Identify nursing responsibilities associated with neurological diagnostic tests and procedures.

5.8 Explain the purpose of the following tests:

Queckenstadt Babinski's Romberg's

5.9 Recognize the methods used by the physician in diagnosing the orthopedic problem.

5.10 Increase his vocabulary by use of proper terminology when referring to specific gastrointestinal problems, treatments and surgical techniques.

5.11 Identify diagnostic examinations and procedures used in confirming a gastrointestinal problem.

5.12 List specific laboratory and diagnostic tests which assist the physician in diagnosing problems of the biliary tract.

5.13 Discuss acid-base balance.

5.14 Demonstrate, in writing, the meaning of blood pH and discuss the normal value of blood gases.

5.15 Discuss the meaning of meq

5.16

Define:	Discuss:
Bleeding time	ACT
Clotting time	Lee White
Capillary fragility	
Prothrombin time	

5.17 Discuss the following diagnostic laboratory tests and discuss the nurse's responsibilities relative to the tests.

serum cholesterol	CPK
triglycerides	LDH
sedimentation rate	SGOT

5.18 Discuss the terms atherosclerosis and arteriosclerosis.

5.19 Analyze a laboratory requisition for blood gases and explain what the findings mean.

5.20 Discuss, from their Maternity Nursing course, the how and why of securing a blood sample for PKU testing.

5.21 Discuss the following diagnostic measures and identify the suspected problem usually associated with these tests:

Bone marrow aspiration	Differential blood count
Gastric analysis	

5.22 List several tests and procedures performed in diagnosing an endocrine disturbance.

5.0 Psychomotor

5.1 Assist physician with diagnostic examinations.

5.2 Administer appropriate nursing care based on the lab and test findings.

5.3 Demonstrate a basic knowledge of medical care and related diagnostic measures.

5.4 Demonstrate, in writing, the physician's purpose in doing a "circulation time" and identify the nurse's role in assisting the physician.

5.5 Practice, in writing, how to describe "dermatoses" clearly and in detail (how you would chart the findings).

5.0 Affective: Appreciate the significance of diagnostic and laboratory tests and relate this to nursing care.

6.0 Cognitive: Recognize and explain the altered physiology, pathology, compensatory mechanisms and emotional aspects of illnesses which occur most commonly.

6.1 Demonstrate the ability to respond appropriately to the patient's emotional needs.

6.2 Recognize and explain the altered physiological or psychological aspects of all health problems studied.

6.3 Demonstrate understanding of the physical and psychological problems related to care of patients with altered body image.

6.4 Discuss appearance and color of the skin. List health problems diagnosed as a result of skin changes, e.g., SLE, Raynauds, etc.

6.5 Recognize the role of drugs as a causative factor in the development of dermatosis.

6.6 Discuss the psychological aspects of having a "skin disease."

6.7 Discuss the nursing care of some of the most frequently seen skin conditions.

drug reactions	keloids
psoriasis	malignant melanoma
scabies and mites	ringworm
skin cancer	warts

6.8 Discuss the principle of gaseous exchange.

6.9 Discuss oxygen toxicity (RDS).

6.10 Discuss COPD, asthma, chronic bronchitis, pulmonary emphysema. How does this group of problems interfere with aeration?

6.11 Define the behavior of the patient with respiratory or metabolic acidosis.

6.12 Define the behavior of the patient with respiratory or metabolic alkalosis.

6.13 Discuss clubbing of fingers in association with hypoxic states.

6.14 Discuss Cor Pulmonalae.

6.15 Discuss the following pulmonary problems that illustrate interference with aeration:

Chest injury (abnormal respiratory movements)
Hydrothorax, pneumothorax, pulmonary embolism, neoplasms (obstruction)
Pneumonia, tuberculosis, coccidioidomycosis, atelectasis (reduction of aerating surface)

6.16 Identify treatments used to correct acidotic and alkalotic states.

6.17 Discuss the meaning of the following terms with regards to acidosis and alkalosis:

partially compensated	over compensated
completely compensated	poorly compensated

6.18 Describe what is happening physiologically in the body's attempt to compensate during acidotic and alkalotic states.

6.19 Demonstrate knowledge and understanding of normal respiratory function and the common interferences and apply this knowledge in constructive nursing action.

6.20 Understand the coordinated action of the respiratory and circulatory systems.

6.21 Recognize acute respiratory emergencies such as pulmonary embolism, mediastinal shift, pulmonary edema and respiratory arrest.

6.22 Recognize those signs in patient behavior that suggest hypoxia.

6.23 Understand that the survival of all living organisms depends on a continuous supply of O_2 to all cells of the body and the removal of CO_2 which is formed in metabolism.

6.24 Explain the basic neurological problem in:

Multiple Sclerosis	Parkinson's Disease
Myasthenia Gravis	Guillian-Barre Syndrome

6.25 Describe the symptoms common to the degenerative neurological problems described above.

6.26 Recognize factors contributing to the development of:

neuritis	encephalitis
trigeminal neuralgia	Guillian-Barre syndrome
meningitis.	

6.27 Identify how the psychological needs of the patients are met.

6.28 Identify types of problems usually seen in rehabilitation centers.

6.29 Discuss the problems that fall into the category of "Rheumatic Disease."

6.30 Define intracranial problems that pose a threat of increased intracranial pressure.

6.31 Describe the various types of head injuries and the symptomology exhibited in each.

6.32 Identify at least ten medical problems in which convulsions might occur.

6.33 Discuss the interrelationships of the endocrine glands.

6.34 Discuss:

Addison's Disease	Diabetes Insipidus	Hyperparathyroidism
Cushing's Syndrome	Diabetes Mellitus	Hyperthyroidism
		Hypothyroidism

6.35 Describe the problem when congenital hypersecretion of the anterior pituitary occurs. What is the result if the hypersecretion occurs in the adult?

6.36 Discuss what some endocrinologists mean by "body image disorders" when referring to endocrine disorders.

6.37 Discuss post-thyroidectomy complications for which the nurse is alert. Define the treatment for such complications.

6.38 Explain the basic physiology of the endocrine system and relate it to the nursing care of patients with regulatory disorders; correlate diet and drugs.

6.39 Understand that it is an excess or deficiency of hormones that is the basis for regulatory disorders.

6.40 Recognize the severe emotional aspect of change in body image due to obesity, pigmentation, hirsutism, moonface and dermatitis.

6.41 Recognize the early signs of diabetic acidosis and insulin reaction.

6.42 Consider the psychological implications for the individual who is informed that he has heart disease.

6.43 List risk factors associated with the development of ischemic heart disease (coronary artery disease).

6.44 Describe myocardial infarction and identify other terms used to describe MI.

6.45 Recognize the signs and symptoms of altered circulation.

6.46 Describe patient behavior indicative of the following complications of MI and discuss treatments:

congestive heart failure	cardiac rupture
cardiac arrest	cardiac tamponade
arrhythmias	cardiogenic shock

6.47 Define:

Essential hypertension
Malignant hypertension
Renal hypertension
Pheochromocytoma

6.48 Define and discuss the following:

Apical pulse
Apical-radial pulse
Pulse deficit
Bundle branch block
Stokes-Adams syndrome

6.49 Identify, in a class seminar, the commonalities exhibited in:

arteriosclerosis obliterans
thromboangitis obliterans (Buerger's)
Raynaud's disease

6.50 Discuss the following problems and their treatment:

thrombophlebitis
varicose veins
lymphedema

6.51 Describe symptomology, laboratory findings, therapeutic management and drugs used in:

Infectious mononucleosis
Pernicious anemia
Leukemia
Disseminated Intravascular Clotting (DIC)
Sickle cell disease
Hodgkins disease
Hemophelia
Polycythemia Vera

6.52 Review common problems of patients with blood disorders and discuss nursing care measures relative to these problems.

6.53 Discuss the constituents of blood and the functions of the main constituents.

6.54 Discuss the conditions and constituents of blood that are necessary for the clotting of blood. Draw a diagram to illustrate the steps in the clotting process.

6.55 Describe the functions of the organs and structures of the biliary tract.

6.56 Identify the excretions and secretions of the biliary system.

6.57 Explain the pathology, describe the symptomology and identify the nursing care of patients with the following frequently seen disturbances of the biliary tract:

Cholelithiasis
Cholecystitis
Acute pancreatitis
Tumors of the pancreas
Hepatitis
Cirrhosis
Tumors of the liver

6.58 Define the major problems of the gastrointestinal tract and gain working knowledge of the many lesser problems affecting nutrition and physical comfort.

6.59 Discuss the nature of the following:

peptic ulcer ulcerative colitis obesity

6.60 Consider the psychosomatic implications of the group of problems in 6.59.

6.61 Discuss the relationship of salicylates to development of gastric ulcerations.

6.62 Define the various types of hernias.

6.63 Define factors contributing to the development of abdominal distention and describe the symptoms of GI distention.

6.64 Describe the types of gastrointestinal problems which may result in the surgical construction of an "ostomy."

6.65 Describe the role of fluids and electrolytes in maintenance of health.

6.66 List the major body electrolytes.

6.67 Describe symptoms attributed to losses of Na and K.

6.68 Identify sign and symptoms associated with hyperkalemia.

6.69 Describe the role of various body organs in maintaining fluid and/or electrolyte balance.

6.70 Identify the symptoms of K, Na and Cl imbalance and the possible causes (drugs, diarrhea, obstruction, etc.).

6.71 Identify the obvious signs and symptoms of nutritional deficiency and/or dehydration.

6.72 Demonstrate an understanding of the physiological differences between the newborn and the older infant.

6.73 Recognize normal characteristics of the infant.

6.74 Evaluate the immediate status of the newborn.

6.75 Recognize and explain the altered physiology of the premature infant and other abnormal conditions of the newborn.

6.76 Understand the principles underlying proper nutrition.

6.0 Psychomotor

6.1 Observe for complications.

6.2 Conduct a therapeutic intervention based on the appropriate theory applicable to the specific disease entity--tested by regularly submitted process recordings.

6.3 Verbally or on paper express an understanding of the emotional impact and change in self-concept of a patient with a dermatological disorder.

6.4 Verbally or on paper express the nurse's role in accepting the patient's appearance.

6.5 Provide physical and emotional comfort for the patient with itching.

6.6 Upon testing know the description of the various lesions listed in the vocabulary.

6.7 Identify the major barriers causing limited motion.

6.8 Identify the relationship that exists between the body systems that affect normal locomotion.

6.9 Evaluate the patient's need for range of motion, passive exercise, and use problem solving approach to meet all of the immobilized patient's needs.

6.10 Understand the principles behind the patient's need for immobilization and the use of traction or casts.

6.11 Recognize changes in neurological signs related to increased intracranial pressure and assess the level of consciousness.

6.12 Recognize levels of consciousness and give appropriate nursing care.

6.13 Recognize various types of seizures and be able to give appropriate nursing care.

6.14 Report and record measurable loss of fluids from the body such as hemorrhage, drainage from a wound or body cavity, drainage due to suction or emesis. Be aware of unmeasurable losses such as edema, pyrexia and diaphoresis.

6.15 The student will care for patient with:

a. Feeding problems, diarrhea, failure to thrive.
b. Need for IV therapy.
c. Infections of gastro-intestinal tract.
d. Psychological nutritional problems.

6.16 Instigate appropriate nursing care based on the evaluation of the immediate status of the newborn.

6.17 The student will care for patients with problems of:

a. Congenital defects of the G.U. tract.
b. Infectious disorders of the G.U. tract.
c. Malignant problems of the G.U. tract.
d. Care of patients receiving specific drugs for G.U. problems.

6.0 Affective: Appreciate the rehabilitation and longevity of the illness.

7.0 Cognitive: Be able to explain the scientific principle or rationale involved in the use of equipment, in the performance of procedures, and in the administration of medications to two or more patients, utilizing various routes.

7.1 Consider improper care of the skin and its role in dermatological problems.

7.2 Recognize and be aware of all possible untoward drug reactions occurring in the pediatric patient.

7.3 Have a basic understanding of the various types of medications used for the dermatology patient.

7.4 Identify drugs used to treat skin lesions.

7.5 Consider the pre-op and post-op care of the patient having dermatologic surgery.

7.6 List the principles of dermatologic therapy.

7.7 Evaluate the burn patient's needs in relation to reverse isolation, medication, surgical treatment, fluids and electrolytes, depth and degree of burns.

7.8 Explain the purpose of skin or skeletal traction and casts.

7.9 Identify the frequently used orthopedic immobilization techniques and equipment:

splints
crutches
Skin traction
  Buck's
  Russell
  Bryant's
Skeletal
  Crutchfield tongs
Balanced traction
  Thomas splint
  Hodgen splint
  Pearson attachment
Halo brace

7.10 Define the problems and nursing care of patients with:

contusion	sprain	dislocation
fracture	gout	tumors

7.11 Discuss the commonly used operative orthopedic procedures of bones and joints

7.12 Identify classifications of drugs used in alleviating pain associated with orthopedic problems. Use the names of drugs to acquaint yourself with drugs in those classifications.

7.13 Explain the aim of medical treatment and nursing care of orthopedic patients.

7.14 List special equipment and techniques observed on the rehabilitation unit.

7.15 Discuss the role of diet and drugs in rehabilitation of the patient.

7.16 Discuss whether the goals (on patients observed) seem realistic.

7.17 Discuss how "bedrest" can be both beneficial and detrimental at the same time.

7.18 Describe the process of bone healing and the role of drugs and nutrition in healing.

7.19 Identify special needs of the amputee.

7.20 Describe the ADA diet.

7.21 Define the nursing care of patients who have had a craniotomy.

7.22 Describe treatments commonly utilized to decrease intracranial pressure.

7.23 Explain the role of diet in IIP.

7.24 Name drugs used in the treatment of IIP. How do they reduce IIP?

7.25 Define the extent of a "neuro check" the nurse would perform on a patient naving the following:

craniotomy
cervical laminectomy
lumbar laminectomy
Guillian-Barre Syndrome
lumbar sympathectomy
cerebral vascular accident
introvertebral tumors

7.26 Describe problems of patients with spinal cord injury or disease.

7.27 Describe equipment and appliances used in treating patients with spinal cord injury or disease.

7.28 Define intractable pain and describe procedures performed in an attempt to alleviate the pain.

7.29 Identify the needs common to most patients having a chronic, progressive disease (neuro).

7.30 Understand the principles behind the patients need for oxygen.

7.31 Explain the proper functioning of equipment used in maintaining or assisting ventilation.

7.32 List additional drugs used for pulmonary problems. Record them on the drug exercise sheet.

7.33 Discuss endotracheal tubes, nursing care, etc.

7.34 Describe the technique of suctioning to provide an adequate airway.

7.35 Discuss the purpose and care of a tracheostomy.

7.36 Discuss inflation and deflation of tracheostomy tube cuffs.

7.37 Define and discuss:

PEEP	Luken's trap	Bronchograms
Bronchoscopy	Lung volumes	Lung capacities

7.38 Discuss IPPB and its use as an assister, controller, guaranter and identify a pulmonary problem or situation in each of the roles in which IPPB is helpful.

7.39 Define the primary purpose of water-seal chest drainage.

7.40 Draw a 2-bottle water seal drainage set-up.

7.41 Discuss medical-surgical management of hypertension.

7.42 Identify drugs and discuss diet related to hypertensive disease.

7.43 Define:

intermi tent claudication
stasis dermatitis
hyperlipidemia
aneurysm

7.44 Discuss:

doppler exam (ultra sound)
angiography
sympathectomy
radio-active studies
endarterectomy
embolectomy
ligation and stripping of veins

7.45 Describe dietary implications for the patient with coronary heart disease. Why do some physicians prefer that ice water not be given to these patients?

7.46 Identify classifications of drugs used in the treatment of myocardial infarction and/or complications of MI. Make a list of drugs commonly used and describe their action.

7.47 Define and discuss the following invasive and non-invasive diagnostic tests:

stress testing
radiograph (x-ray)
cardiac catheterization
electrocardiogram (EKG)
echocardiography
phonocardiography
angiocardiogram

7.48 Identify and discuss various cardiac monitoring devices.

7.49 Identify the purpose of a pacemaker and discuss nursing care of the patient with a pacemaker.

7.50 Identify drugs used in arrhythmias and list the various arrhythmias.

7.51 Discuss the difference between cardioversion and defibrillation.

7.52 Demonstrate, in writing, the pre-op and post-op nursing care of the patient having surgery of the heart or great vessels:

Embolectomy
Coronary by-pass
Valvular prosthesis
Endarterectomy
Aortic graft

7.53 Identify possible problems following surgery of the heart and vessels to which the nurse must be alert.

7.54 Compare the treatment of acute congestive failure (PE) with that of chronic congestive failure.

7.55 Identify how Central Venous Pressure monitoring and Swan-Ganz monitoring differ.

7.56 Demonstrate, using recording-Annie, the technique of CPR. Identify, in writing, the knowledge required to initiate and perform CPR.

7.57 Describe the inspection the nurse performs on a bottle of intravenous solution to rule out a possible contaminated solution.

7.58 Demonstrate, in writing, a formula used in calculating rates of intravenous flow.

7.59 Discuss nursing knowledge and skills associated with the administration of hyperalimentation.

7.60 List, other than oral route, ways in which fluids are administered to patients and which need to be recorded as intake.

7.61 List ways in which patients can lose fluid and which would necessitate the nurse's recording of the loss as output.

7.62 Define the physician's goals in his day-to-day planning of treatment for the patient with an actual or potential body fluid disturbance.

7.63 List the various purposes for which intravenous fluids are administered.

7.64 Understand the principles of IV therapy and methods of administration of fluids to the pediatric patient.

7.65 Recognize need for accurate intake and out put records.

7.66 Describe the action of drugs used in relieving GI distention and name several such drugs.

7.67 Explain the principle and purpose of GI decompression.

7.68 Identify various types of gastrointestinal tubes.

7.69 Describe the procedure of gastrointestinal intubation.

7.70 Recognize improper functioning of a GI tube and become familiar with procedures and techniques which ensure a patent tube.

7.71 Describe the role of gravity in advancement of an intestinal tube.

7.72 Explain the differences and similarities between a gastric tube and and intestinal tube.

7.73 Describe nursing activities that help prevent abdominal distention.

7.74 Discuss the rationale of drugs, diet and surgery in the treatment of the problems listed in item #2.

7.75 Discuss hyperalimentation and the nursing care associated with hyperalimentation administration.

7.76 Define post-op nursing care of the patient who has had a gastrectomy.

7.77 Define nursing responsibilities associated with patients scheduled for gastroscopy.

7.78 Describe gastric cooling measures for the patient having a gastrointestinal hemorrhage.

7.79 Recognize the surgical technique used in constructing the "ostomy" and explain why it is important for the nurse to distinguish between type of "ostomies."

7.80 Describe the technique of colostomy irrigation.

7.81 Describe types of commercially available colostomy equipment.

7.82 Discuss the role of diet for the patient with a colostomy.

7.83 Discuss skin care and odor control associated with colostomies.

7.84 Explain the role of diet and drug therapy in the treatment of biliary tract disease.

7.85 Describe the post-operative care of patients who have had surgery of the biliary tract.

7.0 Psychomotor

7.1 The student will be assigned to patients with problems of:

a. altered body image due to congenital deformities
b. burns
c. communicable diseases
d. errors of metabolism
e. dermatology, including treatments and dressings of these patients

7.2 Provide safe nursing care by utilizing appropriate body mechanics and skill in moving and lifting patients.

Nursing 7A, B and 8A, B: Required Mastery (Continued)

7.3 Demonstrate the ability to use CircOlectric bed, Foster frame, Stryker frame, nasogastric tube feeding, hypothermia, neurological assessment, isolation technique, etc.

7.4 The student will be assigned to patients who have:

a. congenital deformities
b. fractures or other trauma
c. degenerative changes which may impair locomotion
d. traction, casts

7.5 Demonstrate ability to care for the patient in traction, cast or special splints.

7.6 Demonstrate ability in the use of special equipment and technics of care in meeting the needs of the patient.

7.7 Demonstrate nursing care which shows understanding of the patient's need for range of motion, emotional support, safety, comfort, health teaching, prevention of complications.

7.8 Admit patients to hospital.

7.9 Administer pediatric medications.

7.10 Assign to patients with problems of locomotion and mobility.

7.11 Provide experiences in the following: ace bandage, Velpeau bandage, arm sling, pelvic sling, traction, splints, casts, wound irrigation, range of motion exercises, crutch walking, paraffin baths, modification of "activities of daily living," bowel and bladder training.

7.12 Demonstrate, in writing, the computing of a menu for a diabetic patient.

7.13 Assign to at least one patient with an endocrine disfunction.

7.14 Provide experience with giving insulin, teaching a diabetic patient, doing sugar and acetone tests, glucose tolerance test.

7.15 Assign to an eye or ear patient.

7.16 Provide experience with either ear or eye drops, irrigations, compresses, and methods of communication with the deaf or blind.

7.17 The student will be assigned to patients who have problems relating to the eye, ear, nose and throat such as tonsillectomy.

7.18 Demonstrate ability to give pre and post-operative care to eye and tonsillectomy patients.

7.19 Administer oxygen.

7.20 Care for infants with disturbed physiology.

7.21 Utilize appropriate nursing measures to meet needs of patients for oxygen.

7.22 The student will care for patients with:

a. respiratory distress
b. need for oxygen therapy, tracheostomy, using croupette, mist, ultrasonic, IPB
c. need for postural drainage

7.23 Understand and be able to use special equipment necessary for the care of ill newborn.

7.24 The student will be assigned to newborns and prematures in order to:

a. care for the premature
b. care for infants in incubators and/or isolettes

7.25 Assign to patients with problems of gaseous exchange, circulation or regulatory disorders.

7.26 Provide experience with IPPB, O_2, postural drainage, thoracentesis, closed chest drainage, suctioning, arterial blood studies, tracheostomy, skin tests.

7.27 Assign to patients with cardiac problems.

7.28 Provide experience with CVP, cardiac monitor, pacemaker, rotating tourniquets.

7.29 Assign patients with relate PVD.

7.30 Provide experience with TED hose, Buerger's exercises, taking pedal, popliteal and femoral pulse.

7.31 Assign to patients with problems of fluid and electrolyte balance.

7.32 Provide for experience with the following: foly catheter, supra-pubic catheter, three way catheter, ileoconduit, peritoneal dialysis, demodialysis, burn dressings, etc.

7.33 Give assistance and encourage patients who do not maintain or refuse to take adequate oral fluids.

7.34 Assist the doctor with physical examinations and/or circumcisions.

7.35 Initiate and maintain accurate intake and output records.

7.36 Assist the patient in maintaining a balance in nutrition, fluids, electrolytes and elimination.

7.37 Assist "medicine/treatment" nurse with:

a. administration of psychopharmaceuticals
b. treatments specific to psychiatric patients, i.e., ECT and gavage

7.38 Provide experiences with the following:

gastrointestinal decompression (Levine, Miller-Abbott, Sengstaken-Blakemore tubes)
sitz bath
Colostomy or ileostomy care
T-tube care
sump drains

7.0 Affective: Assist the patient in understanding the purpose and nature of diagnostic and therapeutic measures.

RESEARCH AND DESIGN

PROJECT: MOBILITY

STEPS OF CURRICULUM ANALYSIS

STEP 3

USING THEIR COMPLETED COGNITIVE/AFFECTIVE/PSYCHOMOTOR ANALYSIS AND CHARACTERISTICS OF THE TARGET STUDENTS FROM THE NEED ASSESSMENT AND THEIR PAST EXPERIENCE, THE TEAM ASSESSES EACH ELEMENT OF REQUIRED MASTERY TO IDENTIFY WHERE THE STUDENTS ARE ENCOUNTERING PROBLEMS. THEY ALSO IDENTIFY NON-CONTENT RELATED PROBLEM AREAS.

HAVING PINPOINTED AN AREA, IT IS FURTHER ANALYZED TO IDENTIFY WHAT FACTORS ARE CONTRIBUTING TO THE CREATION OF THE PROBLEM. THESE WILL BE THE PROBLEMS THAT THE TEAM WILL FOCUS THE REST OF THEIR EFFORTS ON SOLVING.

STEP 3:

DETAILED INSTRUCTIONS PROVIDED TO THE TEAM FOR STEP 3.

A) IDENTIFY THOSE ITEMS OF MASTERY REQUIRED IN EACH COURSE WHICH REPRESENT PROBLEM AREAS FOR THE DISADVANTAGED STUDENT; I.E., REQUIRED PROFICIENCY LEVELS NOT BEING ATTAINED.

B) DIAGNOSE/IDENTIFY THE NATURE OF THE PROBLEM AREAS AND THEIR PERCEIVED CAUSES FOR PERFORMANCE DEFICIENCIES IN TERMS OF 1) STUDENT RELATED AND 2) CURRICULUM/COURSE RELATED CAUSES.

C) PRIORITIZE THE IDENTIFIED PROBLEM AREAS ACCORDING TO THEIR CRITICALITY FOR CONTINUING SUCCESS BY THE DISADVANTAGED STUDENT.

CORRIGAN ASSOCIATES

P.O. BOX 5089, ANAHEIM, CALIFORNIA 92804 - (714) 539-4359

RESEARCH AND DESIGN PROJECT

Identification of Problem Areas

Instructions For The Completion of Overall Step 3

Operational Definition

Problem Area for the Disadvantaged Student: those areas in the curriculum which consistently present problems to disadvantaged students as a group, rather than to a single individual, which cause any of the following:

a. failure to achieve required mastery proficiency for course/curriculum

b. difficulty in achieving one or more mastery skills or a continuum of skills in a course

c. inability to complete course or curriculum (drops out)

d. the requirement for instructional support beyond that normally provided for students.

Steps To Be Performed

1. Compare course mastery skills with Job Entry requirements in Cognitive/Psychomotor/Affective domains.

   List job entry requirements not presently taught in courses.

2. Assess each mastery item stated for the course and identify any mastery skill within which disadvantaged students encounter academic or content problems in the three domains, per the operational definition, and personal experience.

   Note: If disadvantaged students drop out of curriculum during or following the basic course, and heretofore have not enrolled in higher courses, in analyzing the higher level courses, identify those areas which do present problems to normal students. Rationale: If normal students have problem areas, it can be anticipated that disadvantaged student who remain in the program will encounter similar or worse problems.

   Divide a page into three columns. In the left column, list the identified problem areas in mastery skills.

3. Diagnose/Identify the nature of the problem areas and their perceived causes in terms of critical incidents, personal experience or existing data as related to student related causes or instructional/learning related problems. (See the following for examples.)

   a. Student related causes: List these in center column of page next to mastery problem identified in left column.

Examples:

1. Lack of prerequisite skills required of the mastery skill. (Specify exact skills.)

2. Inability to cope with the reading requirements. (Specify student level of reading, or required level.)

3. Personality or emotional factors. (Cite as related to curriculum, or specific incidents.)

4. Cultural differences. (Cite as related to curriculum or skill mastery.)

5. Cannot transfer knowledge learned in "lecture" to application/psychomotor. (Specify exact nature of failure.)

6. Cannot master cognitive criteria but learns in the lab with oral instructions.

7. Cannot relate "lab" experiences to classroom theory or principles.

8. Any others you might cite.

b. Instructional related causes: List these in the right column opposite mastery problem.

Examples:

1. Learning steps too large for student.

2. Materials (quantity or level) used are beyond abilities of students.

3. Methods of instruction do not match learning styles of students.

4. Failure to build continuum of levels according to taxonomies, i.e., jumping from recall to application, or requiring students to analyze without lead-up learning in comprehension and transfer to application, etc.

5. lack of facilities/equipment.

6. no special services to be responsive to specific needs of group of learners or individuals.

7. any others you might identify.

4. Identify any additional problem areas you know to exist which are not tied directly to an academic mastery skill, i.e., sociological, cultural, emotional, etc.

   These might act as cues which will lead to the identification of areas in the curriculum requiring modification or expansion, or to services which can be provided such learners through counseling/ guidance, etc.

   List problem areas in this category.

5. Prioritize problem areas: The points of reference for this step are the three lists that you have produced

   --Job Entry Requirements not presently taught in courses
   --Academic or content problem areas for mastery in courses
   --Additional problem areas in non-academic category

   a. As a first step, inspect each item on each list and, through concurrence by committee members, determine whether the item would be grouped under the following categories:

      1. Problems which can be handled within the instructional program for which you are responsible

      2. Problems which are academically oriented, but not part of your normal courses, but related to other disciplines

      3. Problem areas for which special services might be provided outside of the instructional program.

      As you are performing this analysis, start a separate list of problem areas recommended for handling by other disciplines of instruction or for special services.

   b. For those problem areas which are within your instructional programs or mastery skills in the courses, reach concurrence by committee members as to the priority order in which problem areas should be solved, considering the following factors:

      1. Criticality of the problem mastery skills to continuing or following skills in the course

      2. How failure to master a particular skill contributes to overall achievement of course objective and criteria

      3. Criticality of mastery of cognitive content before transfer to application or psychomotor

4. How mastery of problem areas in the basic course carries over to higher level courses (i.e., will achievement in the basic course reduce problems identified in following courses, or are problems in higher courses related to the specific content in those courses?)

5. Importance of success in mastery of cognitive and psychomotor skills in reducing problem areas in the affective domain

On the list of problem areas for mastery in courses, number the items in priority order.

COURSE TITLE : _____ PROGRAM (VOCATIONAL/OCCUPATIONAL AREA): _____

IDENTIFICATION OF PROBLEM AREAS AND SOURCES OF PROBLEMS

Problem Areas for Students	Sources of Problems		
	Student Related Causes	Instructionally Related Causes	Sociological/Cultural Causes

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

Problem Area for Student	Student Related Causes	Instructional Learning Causes	Sociological/Cultural Causes
1. Mathematics	1. Inability to solve word situation problems		
2. Inability to Problem Solve	2. Failure to make the transfer of problem solving from the life experiences to the academic setting	2. No exposure to the problem-solving process	2. Has problem solved only in so far as life experiences are concerned but none in the academic setting
3. Scholastic Achievement	3.1 Inability to transfer previous learning 3.2 Weak in the sciences 3.2.1 Lacking in self-discipline 3.2.2 Failure of the student to perceive the necessity of learning the basics before proceeding to more complex courses	3.1 Amounts of material required to be mastered in a given time frame 3.2 Weak in the sciences 3.2.1 Instructor failure in assisting the student to understand how the scientific principle relates to the situation at hand 3.2.2 Failure to view the teaching blocks (steps) from the learner's point of view	3.1 Weak in the sciences 3.1.1 Lack of examples in both the family and social settings that achievement in "science" is the goal to pursue
4. Financial		4.1 Lack of permanent faculty 4.2 Cost of nursing school; pupil-teacher ratio = 1 to 15 4.3 Lack of funds to staff skills lab all day instead of specific hours during the first year	
5. Fragmentation of Instruction		5.1 Duplication of instruction by different teachers in small groups 5.2 Nursing students have up to nine teachers in two years of study	
6. Change of Methodology	6.1 Student perceives the activity as a "new" procedure rather than another way to achieve the same results	6.1 Student perceives the activity as a "new" procedure rather than another way to achieve the same results	

Problem Area for Student	Student Related Causes	Instructional Learning Causes	Sociological/Cultural Causes
7. Inadequate Background in Academic Skills	7.1 Low or lack of self-discipline in all academics 7.2 Just get by in all courses 7.3 "Con-job" on the "do well"; help the blacks, browns; "goodie-goodie" teachers 7.4 No science courses attempted	7.1 Counseled into so-called "easy courses" 7.2 Allowed to skip or take watered-down courses 7.3 No science courses attempted 7.4 Teacher does not believe that child is capable of academic achievement	
d. Allowed to Underachieve in Elementary, Jr. High and High School. (This is all reflected in their reading, writing, arithmetic and all other subjects.)	8.1 Developed feeling of "don't care" at early age and this was perpetuated by an endless sequence of apathetic teachers, counselors, etc. 8.2 Developed lazy attitude because no one cared	8.1 Apathetic teachers 8.2 Was never bothered for fear that one would create a classroom disturbance 8.3 Required to do minimal work (or copy assignment from others) 8.4 Administration says pass the kids; no failures	8.1 No help from family, if there is any family
B. PROBLEMS CAUSING THE REGISTERED NURSING STUDENT TO LEAVE PROGRAM BEFORE COMPLETION			
9. Emotional Problem That Deprives One of Normal Behaviors	9.1 Immaturity 9.2 Physical or emotional illness	9.1 Teachers with class or racial biases	9.1 Poverty 9.2 Low self-esteem 9.3 Fragmented family structure 9.4 Cultural repression 9.5 Personal marital problems
10. Change of Major (Academic)	10.1 Didn't like nursing		10.1 Parental insistence to take nursing
11. Scholastic	11.1 Inability to carry required number of units in a specific time limit		11.1 The need to work to supplement family income 11.2 Inability of the foreign-born student to interpret the Englis language without changing the content or meaning.
12. Physical Limitations	12.1 Illness of self or family members 12.2 Disabilities such as hearing loss, sight loss, back problems etc.		
13. Attitudes	13.1 Unrealistic goals 13.2 Normal adolescent tendency to not heed advice from adults		
14. Absenteeism	14.1 Lack of self-discipline	14.1 Registered nursing program has a written policy permitting dropping a student for a set number of absences	14.1 Lack of self-discipline

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

NON-INSTRUCTIONAL AREA

Problem Area for Student	Student Related Causes	Instructional Learning Causes	Sociological/Cultural Causes
A. OBSTACLES THAT PREVENT ENTRY INTO THE NURSING PROGRAM			
1. Child Care			1.1 No day-care facilities on campus 1.2 No financial support to place child elsewhere 1.3 No one in home to care for child
2. Financial			2.1 Lack of money for basic necessities (food, transportation, housing, education, supplies)
3. Family Disunity (A Fragmented Family Structure)			3.1 One parent families 3.2 Strong feeling of insecurity 3.3 Time for today, plan for today; think of now 3.4 Success model is the mother 3.5 Immediate gratification 3.6 Can't relate to the abstract 3.7 Early pregnancies due to lack of father image in home 3.8 Emotional problems 3.9 Resentment of spouse toward partner who has returned to school 3.10 Teenage children required more parental supervision than anticipated

Problem Area for Student	Student Related Causes	Instructional Learning Causes	Sociological/Cultural Causes
4. Lack of Self Discipline	4.1 Short attention span 4.2 Limited study skills and habits 4.3 No or low motivation to enhance study habits and good grades		
5. Misdirected Counseling (Jr. High and High School)			5.1 Students told not to take science and math courses because they are too hard and one will fail them (H.S.) 5.2 Encouraged to take easy classes (H.S.) 5.3 Complete bare minimum courses for graduation 5.4 Limited information given student 5.5 Poor understanding by the Counselors themselves of what is entailed in the nursing program 5.6 Minimal encouragement given in high school to attempt certain professions requiring mastery of mathematical and scientific courses.
6. Low Self-Esteem	6.1 Seeing oneself as incapable, academic-wise 6.2 Very insecure--won't try, due to the idea that they feel that they will fail		6.1 Stems from the absence of parents, both 6.2 Lack of reinforcement of self-esteem through the media of T.V., etc.; very low profile 6.3 Cultural repression 6.4 No help from media (T.V., radio, etc.): most programs show the black male as superstud or inferior in most ways

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Problem Area for Students	Student Related Causes	Instructional/Learning Causes	Sociological/Cultural Causes
1. The difficulties that nursing students have in dealing with the realities of pain, dying and other emotional aspects in nursing.	1.1 Lack of experience in this area. 1.2 Personal negative experience in one of the areas. 1.3 Student stress in the clinical setting.	1.1 Presently there are no adequate support services in the psychological areas to allow the student to work through the realities of these issues as related to them.	
2. Understanding acid-base and fluid and electrolyte balance of the body.	2.1 Students have difficulty in transferring these concepts from allied courses such as chemistry and physiology. 2.2 Student stress in the clinical setting affects recall and transfer.		
3.* Nursing students demonstrate difficulty in mathematical computations required for the safe administration of medications.	3.1 Possess inadequate skills in converting decimals to fractions, percent or ratio and vice versa. 3.2 Inability to solve word situation problems. 3.3 Student stress in computing a dose for actual administration to a patient tends to alter the accuracy of their basic mathematical computations.	3.1 A carryover from poor or inadequately acquired skills in math in the elementary level of school.	
4. Unable to locate the pedal pulse 90% of the time.	4.1 Failure to recall anatomic location of the artery and anatomical variations from individual to individual.		

* Non-instructional area

Research and Design Project, Registered Nursing
Identification of Problem Areas and Sources of Problems (Continued)

Problem Area for Students	Student Related Causes	Instructional/Learning Causes	Sociological/Cultural Causes
	4.2 Digital pressure applied is too great for the artery. 4.3 Failure to practice sufficiently locating student's own pedal pulse.		
5. Have difficulties in applying the nursing process in the clinical setting.	5.1 Difficulty in transferring the theory to the actual situation in the clinical setting. 5.2 Self stress exists to a sufficient degree in every student to virtually make students self-centered as opposed to patient-centered.	5.1 High student/teacher ratio severely limits teacher availability to students. 5.2 Insufficient time allotment to role play and review media materials regarding problem solving. 5.3 Simulated situations and role playing do not prepare the student for the unpredictable behavior of a patient. Presently the role playing, etc., does not effectively portray the dynamics of a real situation such as sound intensity and physical and emotional types of outbursts on the part of the patient.	5.1 Insufficient life experience in applying problem solving.
6. Isolation technique; principles of contaminated versus uncontaminated. Eliminating the transfer of pathogens.	6.1 Incomplete learning or understanding of the concepts of contaminated as related to uncontaminated areas. Student becomes method reliant as opposed to procedure oriented.	6.1 Role playing incomplete; media doesn't incorporate new concepts of isolation procedures.	
7. Job entry requirements not presently taught in courses. 7.1 Management and leadership skills: ability to make assignments; delegate nursing actions to others; coordinate nursing activities; accept responsibility; counseling and teaching; evaluating the work of others. However, the two-year A.A. program is not expected to deal in these areas. The skills are developed in the four-year B.A. program and the employer relies on individual characteristics of A.A. students in assuming such roles.			

RESEARCH AND DESIGN

PROJECT: MOBILITY

STEPS OF CURRICULUM ANALYSIS

STEP 4

NOW THAT THE TEAM HAS PINPOINTED EXACTLY WHERE THE TARGET STUDENTS ARE ENOUNTERING PROBLEMS AND THE FACTORS CREATING THE PROBLEMS, THEY WILL TURN THEIR ATTENTION TO SOLVING THOSE PROBLEMS.

SOLVING THE PROBLEMS WILL INVOLVE THE SELECTION OR DEVELOPMENT OF NEW METHODS AND MEDIA OF INSTRUCTION, NEW PROGRAMS AND NEW SERVICES, ALL TAILORED TO THE UNIQUE NEEDS OF THE TARGET LEARNERS. BEFORE THE TEAM CAN MAKE THESE KINDS OF DECISIONS, HOWEVER, THEY MUST MORE SPECIFICALLY DEFINE THE EXACT NATURE OF THE MASTERY REQUIRED AND THE CRITERION OF MASTERY FOR EACH OF THE CONTENT PROBLEM AREAS. THIS WILL GIVE THEM ALL THE DATA THEY REQUIRE TO BE SURE THE CHANGES THEY RECOMMEND WILL BOTH GIVE EACH STUDENT THE SKILLS/KNOWLEDGES/ATTITUDES REQUIRED FOR EMPLOYMENT AND BE RESPONSIVE TO THE LEARNERS' NEEDS. THE METHODS/MEDIA RECOMMENDATIONS IDENTIFIED AT THIS STEP WILL BE COMBINED WITH THE RECOMMENDATIONS THAT WILL COME FROM STEP 5. IN COMBINATION THEY WILL CONSTITUTE THE TEAM'S SOLUTIONS TO THE PROBLEMS IDENTIFIED.

STEP 4:

DETAILED INSTRUCTIONS PROVIDED TO THE TEAM FOR STEP 4.

A) RESTATE THE PRIORITY PROBLEM AREAS AS TERMINAL PERFORMANCE OBJECTIVES.

B) DERIVE CRITERION MEASURES FOR EACH TERMINAL PERFORMANCE OBJECTIVE.

C) ANALYZE THE LEARNING REQUIREMENTS TO ACHIEVE EACH OBJECTIVE.

D) ORGANIZE THE LEARNING STEPS.

E) ANALYZE ALTERNATIVE METHODS AND MEDIA.

CORRIGAN ASSOCIATES

P.O. BOX 5089, ANAHEIM, CALIFORNIA 92804 - (714) 539-4359

RESEARCH AND DESIGN PROJECT

Development of Mastery Skills Identified as Priority Problem Areas

Instructions For The Completion of Overall Step 4

As a result of the identification of problem areas for disadvantaged learners in the mastery skills for each course, the faculty analysts will have made decisions as to the following:

1. Those problems which can be handled within the instructional/learning environment of the special areas' curriculum;
2. Those problems which should be handled either by
   a. other subject matter specialists (example, reading, math, others)
   b. special support services (example, counseling, guidance, psychological, placement, etc.).

Priorities for development will have been established also.

The procedures listed below are those which will be performed by the faculty to develop learning sequences and solutions for learning problems which can be handled in the instructional/learning environment (#1 above). Other problems will be referred to appropriate groups.

Throughout the procedure, itemized below, references will be made to portions of the SAFE manual, Designing For Predictable Learner Success--the manual used in the training sessions. The faculty analyst might reread the referenced sections for explanation, examples, processes and forms.

SUGGESTION: A more productive and efficient use of the faculty time might result in assigning each member of the team a different problem mastery skill for development, applying the following steps. Group concurrence might be reached in the individual products, periodically. In this manner several products might be developed in the time that it would take the group to produce one.

STEP 1. Restate the Problem Mastery Skill as a Terminal Performance Objective.

Reference: SAFE manual, pages 161-178, "Deriving and Stating Terminal Performance Objectives (T.P.O's)." Also see pages 61-78, "Criteria for the Writing and Critique of Performance Objectives."

Refer to the statements in the course mastery analysis (cognitive/psychomotor/affective). Add the elements to this statement which will expand it into a well stated learning objective, as specified in SAFE manual.

Refer also to the criterion measures identified in the mastery analysis for the evaluation portion of the objective.

Write objective in left column of Form I-2.

STEP 2. Derive Terminal Performance Criterion Measures.

Reference: SAFE manual, pages 179-199.

If you did not state criterion measures during mastery skill analysis, develop them now from the Terminal Performance Objective.

Some groups already performed this step when identifying the criterion measures in the course mastery skill analysis (criterion levels and specific test items).

However, since you have performed further analysis of the mastery skills during problem identification, you might have generated further data or gained other insights regarding learning proficiency. It is suggested, therefore, that you review the prestated criteria to determine the following:

a. Whether the level of proficiency is still acceptable or should be increased or decreased;
b. Whether the criterion measures or test items are valid measurement of achievement of the objective to indicate mastery;
c. Whether the present method of evaluation is still suitable or whether alternate methods of evaluation with the disadvantaged population might yield the data required for evaluation;
d. Whether additional items must be added or existing items deleted or changed so that the evaluation instrument or activity measures all aspects of mastery.

Your expertise and your problem identification analysis statements will be the basis for these judgments.

If changes are required, make them at this point.

In the second column of Form I-2, "Criterion Statement," list the conditions of evaluation.

In the third column of Form I-2, write in the items and instructions given to the student in the testing condition.

a. If questions on a final exam are used for evaluation, include only those items which measure this objective.
b. If a unit test is to be used, the test might be stapled to the form.

c. If evaluation is performance of psychomotor skills or activities, list the instructions given the student.

STEP 3. *Analysis of Learning Requirements to Achieve Objectives.*

Reference: SAFE manual, pages 201-219, Taxonomies Handout, and pages 145-146.

Using Form J-2, analyse the lead-up content (cognitive), skills (psychomotor), behavior (affective) required for achievement of the T.P.O.

Those groups who used course content outlines for identifying mastery skills will have a start on this step. The subtopics on the outlines might represent lead-up knowledge/skills. However, you might determine whether these should be expanded to give you all the required data for learning related to the T.P.O.

In doing this analysis, the reference is the disadvantaged learner.

1. Identify first what level in the taxonomy represents mastery.

2. Analyse from the learner's entry level* and from what the learner needs to know and do to build all elements of mastery.

*Entry level refers to what they have mastered from previous learning sequences or courses.

3. Refer to the taxonomies to determine what lead-up activities and levels the learner must achieve on a continuum from simple to complex.

Remember--do not leave out learning levels.

--they must learn and practice the mastery level before evaluation; i.e., if they must analyse, do not expect to give learning experience in recall, comprehension, and application and then expect them to analyse. They must also have learning experience in analysing or must learn how to analyse.

The columns on Form J-2 will give you cues.

STEP 4. *Organize Learning Steps/Sequence.*

Reference: SAFE manual, pages 277-299.

a. Using Form K-2, organize the learning requirements from the Cognitive/Psychomotor/Affective Analysis (Form J-2, 3) into the actual learning step sequence the learner will perform to achieve the objective.

Note: This might be in the order you stated in the analysis or you might want to schedule several recall activities or comprehension activities before application (for example).

Enter sequence in the left column of Form K-2.

b. As you are sequencing the learning steps, determine the response desired from the learner and whether this will be evaluated. Enter these in the second column of Form K-2.

STEP 5. Method/Media Analysis.

Reference: SAFE manual, papes 305-329.

a. Using the Decision-Making Model on page 312, SAFE manual, perform a method/media analysis on each learning step or a sequence of learning steps to determine the requirements based on the nature of the learning activities. This analysis can be performed quickly once you practice using the Decision-Making Model.

b. In Column 3, Form K-2, list the methods/media alternatives which can be used for the learning step or a sequence of steps. The alternatives might be those which you know about now. You might also wish to investigate others which are available in the Media Center or which are commercially available--both of which can be screened to determine if they meet the requirements for your population. Another possibility is that the Media Center might develop something, if nothing exists to meet your requirements.

In the last column, indicate your recommended selection, or final selection can be made during the management planning step.

ACTUAL SIZE 8½" X 14"

FORM I-2

Curriculum _____

Course/Unit Title _____

TERMINAL LEARNING REQUIREMENTS

Curriculum Analyst _____

Date _____

Terminal Performance Objectives	Criterion Statement	Criterion Measure
No.	No.	No.

ACTUAL SIZE 8½" X 14"

FORM J-2

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Course/Unit: _____

T.P.O # _____

Level of Mastery: _____

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)

ACTUAL SIZE 8½" X 14"

Course/Unit: _____

T.P.O. # _____

LEARNING SEQUENCE

FORM K-2

LEARNING STEPS	RESPONSE/EVALUATION	ALTERNATE METHODS/MEDIA	METHOD/MEDIA SELECTION

151

152

FORM I-2

Curriculum Nursing 1 and 2

Course/Unit Title Vital Signs

TERMINAL LEARNING REQUIREMENTS

Curriculum Analyst _____

Date _____

Terminal Performance Objectives	Criterion Statement	Criterion Measure
No. 4.0 By the end of the unit of study, the student will be able to locate and count the pedal pulse.	No. 4.0 Be able to locate and count the pedal pulse 90% of the time.	No. 4.0 In the classroom setting, you will be required to locate and confirm with your instructor your own pedal pulse and the pedal pulse of three of your peers.

FORM J-2

Course/Unit: Nursing 1 and 2

T.P.O # 4

Level of Mastery: Application

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
4.1.1.1 How to take a pulse. 4.1.1.2 Identify the pedal pulse area.	4.1.1 Identify the anatomical area.	4.1 Locate the general anatomical area.			
4.2.1.1 Physiological and structural differences resulting from factors such as weight, size, sex, and physical state of vessel. 4.2.1.2 Palpate above, below and to the sides of the area where the pedal pulse is usually found and utilize various degrees of pressure to compensate for the above variables.	4.2.1 Explain how anatomical structures differ from person to person and require adjustment for those differences.	4.2 Adjust for differences in location of pedal pulse from individual to individual.			
4.3.11 The vessel is small and easily obliterated with pressure.	4.3.1 How excessive pressure on a delicate tissue structure may interrupt or obliterate the beat of a small vessel.	4.3 Apply pressure gently so as not to obliterate the beat of the pedal pulse.			

FORM J-2

Course/Unit: Nursing 1 and 2

T.P.O # 4 (Continued)

Level of Mastery: Application

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
4.4.1.1 The depth, size, location, and physical state of the vessel makes capture of every beat difficult.	4.4.1 Why it is difficult to achieve counting of the pedal pulse to 100% of accuracy.	4.4 Count the pedal pulse if possible.			

FORM K-2

Course/Unit: Nursing 1 and 2

T.P.O. # 4

LEARNING SEQUENCE

LEARNING STEPS	RESPONSE/EVALUATION	ALTERNATE METHODS/MEDIA	METHOD/MEDIA SELECTION
	1. Following the completion of the comprehension portion of instruction, students must pass a written test covering all items included in recall and comprehension. 2. See criterion measure for test following application portion of instruction.		

Curriculum Nursing 1 and 2

Course/Unit Title The Nursing Process

TERMINAL LEARNING REQUIREMENTS

FORM I-2

Curriculum Analyst _____

Date _____

Terminal Performance Objectives	Criterion Statement	Criterion Measure
No. 5 By the end of the unit, the student will be able to apply the nursing process at a beginning level.	No. 5 The student will demonstrate, in writing, the ability to systematically identify a patient's actual or potential problems, make a plan to solve them, initiate the plan and evaluate the results.	No. 5 You will be assigned a patient. You will document the five steps of the nursing process as you care for the patient. Your written results are to be presented to your instructor for approval. You will be required to perform this exercise three times with three separate patients.

FORM J-2

Course/Unit: The Nursing Process

T.P.O # 5

Level of Mastery: _____

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
Be able to recall the parts of the nursing process: Gathering Information 1. Sources 2. Techniques 3. What is appropriate informatio Assessment 1. Physical 2. Emotional 3. Identifying norms and potential needs Intervention/Plan 1. Determine goals 2. Consider solution 3. Select a solution Intervene/Implement 1. Putting plan to work Evaluation 1. Has change occurred? 2. Would an alternate solution have worked or worked better? 3. Any new problems?	Explain: 1. All parts of the nursing process. 2. Basic human needs. 3. How a solid base in biological and sociological sciences, a knowledge of human growth and development, and knowledge of basic pathophysiology and psychopathology are crucial to the nursing process.	Utilize a systematic approach. Identify a patient's actual or potential problem(s). Make plans to solve the problem(s). Initiate a plan. Evaluate the results.	1. Assign priority to problems identified. 2. Develop a rational scheme or guide. 3. Consider alternate solutions. 4. Differentiate problems that can be resolved by: Nursing intervention Patient himself Referred to others on the health team.	Selection and implementation of: 1. Nursing actions dependent independent 2. Safe nursing techniques. 3. Protection from danger, injury, risk. 4. Teaching and counseling. 5. Delegating nursing actions to others.	Determination whether the goals, immediate, intermediate, or long range, have been realized or whether new problems have emerged. The impact of the change, if any. Has plan been effective or should it be modified or expanded? Should alternate solution be implemented?

Course/Unit: The Nursing Process

T.P.O. # 5

LEARNING SEQUENCE

FORM K-2

LEARNING STEPS	RESPONSE/EVALUATION	ALTERNATE METHODS/MEDIA	METHOD/MEDIA SELECTION
As derived on Form J-2.	1. Following recall, the student must achieve 100% of all required mastery on a paper and pencil test. 2. Comprehension through Evaluation tested by Criterion Measure stated on Form I-2.	Methods: 1. Theory (Skills) 1.1 Repeat unit until mastered. 1.2 Redesign/beef up simulated situations to more closely reflect actual situations. 1.3 Increased practice time through: 1.3.1 Teacher assistants 1.3.2 Utilize second year student to tutor in the skills lab (for pay) 2. Laboratory (Clinical) 2.1 Repeat application of theory until mastered. 2.2 Assistant clinical instructors, must be a R.N. Media: 1. Keep skills lab open for students daily (including afternoon and evening).	

Curriculum Nursing 1 and 2

Course/Unit Title Isolation

TERMINAL LEARNING REQUIREMENTS

FORM I-2

Curriculum Analyst _____

Date _____

Terminal Performance Objectives	Criterion Statement	Criterion Measure
No. 6 By the end of the unit, the student will be able to know and apply the facts and principals of isolation and demonstrate the ability to practice correct isolation technique for the safety of patients, visitors, staff and self.	No. 6 By the end of the unit of study, the student will demonstrate strict isolation procedure to 100% of accuracy.	No. 6 Given materials in a simulated situation, you will be required to demonstrate correct gowning and masking, putting on and removing; correct entry and exit from the room; double-bag materials for removal from the room; cleaning or disposing of food tray for any isolation situation.

FORM J-2

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Course/Unit: Nursing 1 and 2 - Isolation

T.P.O # 6

Level of Mastery: Application

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
Understand the nature of pathogenic organisms. Know the 2 major purposes of isolation List the 5 categories that the Center for Disease Control in Atlanta, Ga. has suggested as a modification of isolation technique. Identify how a room is prepared for isolation. Identify points of instruction on isolation for patients, family and visitors. Identify causes and effects of sensory deprivation	Illness and lowered resistance. The problem of hospital acquired infections. The medium in which different organisms survive, multiply and produce infections. Solutions, antiseptics, antibacterials, etc., that are effective against specific organisms. Technique of hand scrubbing that effectively reduces bacteria. The purpose of medical asepsis. Techniques used to minimize spread of pathogenic organisms.	Demonstrate: Correct gown and masking --putting on and removing; Correct entry and exit from an isolation room; Appropriate double-bagging of materials for removal from room; Correctly cleaning or disposing of food tray.			

Registered Nursing

Course/Unit: Isolation; The Nursing Process; Vital Signs

T.P.O. # _____

LEARNING SEQUENCE

FORM K-2

LEARNING STEPS	RESPONSE/EVALUATION	ALTERNATE METHODS/MEDIA	METHOD/MEDIA SELECTION
As derived on Form J-2.	1. The student must demonstrate 100% mastery on a paper and pencil test of all the items in the Recall column. 2. All items identified in the columns Comprehension through Evaluation will be tested by Criterion Measure stated on Form I-2.	Methods: 1. Theory (Skills) 1.1 Repeat unit until mastered (continual access to cassettes, A-V tapes, equipment, etc., presently available). 1.2 Redesign/beef up simulated situations to more closely reflect actual situations. 1.3 Increased practice time through: 1.3.1 Teacher assistants 1.3.2 Utilize second year student to tutor in the skills lab (for pay). 2. Laboratory (Clinical) 2.1 Repeat application of theory until mastered. 2.2 Assistant clinical instructors, must be a R.N. Media: 1. Keep skills lab open, with instructor available, for students daily (including afternoon and evening). 2. Intense efforts should be made to locate media which portrays, as realistically as possible, a wide range of physical and emotional behavior of a person who is ill.	Committee determined that all alternatives shared a common priority. Please also refer to the Committee's General Recommendations for further explanation of the methods/ media identified.

RESEARCH AND DESIGN

PROJECT: MOBILITY

STEPS OF CURRICULUM ANALYSIS

STEP 5

THE FINAL STEP TAKEN BY THE TEAM IS TO PULL TOGETHER ALL THEIR FINDINGS AND RECOMMENDATIONS INTO ONE DOCUMENT. THIS DOCUMENT, IN COMBINATION WITH THE METHODS/MEDIA ALTERNATIVES IDENTIFIED IN STEP 4 WILL BE THE BASIS FOR SPECIFIC PROGRAM CHANGES TO BE IMPLEMENTED IN PHASE III OF THE RESEARCH AND DESIGN PROJECT. IN COMBINATION WITH THE OTHER PORTIONS OF THE PROJECT, I.E., COUNSELING AND GUIDANCE, MANAGEMENT PLANS, EVALUATION AND AUDIT SYSTEMS, THE CURRICULUM DESIGN RECOMMENDATIONS SHOULD ELIMINATE THE HURDLES TO SUCCESS BEING ENCOUNTERED BY DISADVANTAGED AND/OR HANDICAPPED VOCATIONAL EDUCATION STUDENTS. IF THEY DO NOT, THEY WILL BE REANALYZED AND REVISED UNTIL THEY DO.

STEP 5:

A) DEFINE SPECIFIC RECOMMENDATIONS OF PROGRAM/COURSE CHANGE TO ELIMINATE THE IDENTIFIED PROBLEMS AND PRODUCE THE REQUIRED MASTERY.

RESEARCH AND DESIGN PROJECT
REGISTERED NURSING

General Recommendations

I. Characteristics of Nursing Skills Lab

The solution to most of the priority theory and practice problems encountered by nursing students are tied to the more effective use of the Nursing Skills Lab. There are, however, some basic problems within the existing Skills Lab which must be solved before specific changes can be implemented. These problems include:

a. Severe space limitations that limit the number of students that can use the Lab;
b. Environmental problems that make working and studying in the Lab uncomfortable;
c. Limited media and equipment available in the Lab, insufficient for student demand;
d. Much of the media is stored away from the Skills Lab, thereby away from student access and instructor support;
e. The hours that the Lab is available do not correspond to demands of all students;
f. Insufficient access to qualified instructors for clarification of problems when they occur in the Skills Lab due to existing student-teacher ratio.

It is the recommendation of the Committee, therefore, that a restructuring of the Nursing Lab take place which includes:

a. Relocation or expansion of the existing Nursing Skills Lab to provide for sufficient space to be responsive to student demands for:

    1. Structured simulation
    2. Individualized media use
    3. Space for practice
    4. Access to peers and instructors for clarification;

b. The addition or improvement of temperature controls that make the Nursing Skills Lab a comfortable environment in which to work and study;
c. The consolidation of all existing methods/media specific to the Nursing Program and housing them in the Nursing Skills Lab;
d. The expansion of available media to realistically portray as wide an array of patient behavior and problems as possible;
e. The expansion of the individualized equipment (cassettes, films, carousels, etc.) in the Nursing Skills Lab to meet student demand;
f. The expansion of Nursing Skills Lab hours to allow the Lab to stay open day and evening hours, thereby making it available to students with varying schedules;
g. The rescheduling of existing staff or the addition of new staff to cover the expanded Nursing Skills Lab schedule.

Research and Design Project, Registered Nursing
General Recommendations (Continued)

Specific recommendations for the optimal physical layout of a Nursing Skills Lab were obtained from the entire Registered Nursing faculty on or about late June 1972

II. Academic Workload

Overall academic load is too great (total number of units being carried in a semester).

It is the recommendation of the Committee that disadvantaged students be counseled to complete all non-nursing and remedial courses prior to seeking admission to the Registered Nursing Program. This would provide the student with an exposure to the types and difficulty of courses they must master to be a Registered Nurse without taking one of the limited spaces in the Registered Nursing Program. It would also increase the probability of their success when and if they qualify for the Registered Nursing Program by reducing the semester workload they would carry over the two years and summer session.

III. Course Change

Changes that have occurred in the nursing field have decreased the relevance of principles acquired in a chemistry course. It is recommended that mastery of a Physics in Nursing course would be more relevant and should replace the chemistry requirement.

Critical elements of mastery should include such concepts as included in attachment A. Final content and method/media should be determined by Nursing faculty consensus.

IV. Special Services

Nursing students have difficulty dealing with the realities of pain, dying and other emotional aspects in nursing. Contributing factors include lack of experience in this area, personal negative experience in one of the areas, student stress in the clinical setting.

Presently there are no specific support services in the psychological counseling area to allow the student to work through the realities of these issues unique to nursing.

It is the recommendation of the Committee, therefore, that a psychological counseling service be initiated and tailored for continuous availability for nursing students encountering problems with these and other related psychological adjustments specific to nursing. See attachment B, Form J-12 for Committee's analysis of some of the critical issues to be addressed.

V. Basic Math Skills

Nursing students demonstrate difficulty in mathematical computations required for the safe administration of medications.

It is a recommendation of the Committee that a basic math course be designed that addresses itself to increasing skills in converting decimals to fractions, percent or ratio and vice versa and ability to solve word situation problems.

VI. Allied Courses

Students have difficulty in transferring key concepts of acid-base and fluid and electrolyte balance of the body from the chemistry and psychology courses.

It is the recommendation of the Committee that a library of methods and media specific to key concepts of acid-base and fluid and electrolyte balance be created and housed in the Nursing Skills Lab. This would allow students continuous access to these reinforcers where a nursing instructor is available for guidance and clarification.

This recommendation should be considered in combination with general recommendation #3 specific to the creation of a Physics in Nursing course.

See attached Forms I-2 and J-2 specific to homeostasis for Committee's analysis of some of the critical issues to be addressed. (attachment C)

VII. Staffing

1. The present demand upon existing Registered Nursing faculty time precludes satisfying the increased need for individualized attention required by the disadvantaged student in both the Nursing Skills Lab and the clinical lab.

It is the recommendation of the Committee, therefore, that additional person(s) be added to the Registered Nursing faculty to staff the Nursing Skills Lab and assist in instruction in the clinical setting.

2. It is the finding of this committee that minority disadvantaged students:

a. have unique social and psychological problems which they bring with them or acquire due to their life experiences;

b. have a special need for role models as a source of motivation and pride;

c. have a need to see the college's commitment to ethnic representation on the Registered Nursing Faculty.

Presently, Spring 1978, the Registered Nursing program has six full time faculty members, one of whom is from a minority group. It is the recommendation of this committee, therefore, that the addition of any new staff member(s) for the Registered Nursing program be not only a qualified Registered Nurse but from an ethnic minority not presently represented on the faculty.

VIII. Applicant Preparation

1. Analysis of why disadvantaged students have difficulty in being accepted into the Registered Nursing Program reveals deficiences in ability to master basic mathematics and successfully pass the science courses.

It is the recommendation of the Committee that the students be counseled as early as possible in the educational process. It is the feeling of the Committee that counseling as early as the sixth grade is not unrealistic.

2. A poor understanding of the skills, knowledge and basic realities of the Registered Nursing profession has contributed to students dropping out of the Nursing program.

It is the recommendation of the Committee that an orientation package similar to the "So You Want To Be a Nurse" package prepared by this Committee be mandatory reading by all career applicants considering a Registered Nursing career. (See attachment D.)

CONTENTS

NURSING AND THE SCIENCE OF PHYSICS
1. The Nature of Science

MEASUREMENT IN PHYSICS AND NURSING
2. Measurements and Accuracy
3. Forces--Concurrent and Non-concurrent

MOTION IN PHYSICS AND NURSING
4. Types of Motion--Speed, Velocity, and Acceleration
5. Gravity--Center of Gravity and Specific Gravity

ENERGY IN PHYSICS AND NURSING
6. Work, Energy, and Power
7. Principles of Machines, Friction, and Simple Machines

MOLECULES IN PHYSICS AND NURSING
8. The Framework of Matter

PRESSURE IN PHYSICS AND NURSING
9. Fluids--Pressure in Liquids
10. Fluids--Pressure in Gases
11. Subatmospheric Pressure and Clinical Applications

HEAT IN PHYSICS AND NURSING
12. The Nature and Measurement of Heat
13. Effects of Heat
14. Heat Transfer

WAVE ENERGY IN PHYSICS AND NURSING
15. Periodic Motion
16. The Physics of Sound and Hearing
17. The Nature and Measurement of Light
18. The Physics of Vision

ELECTRICITY IN PHYSICS AND NURSING
19. Magnetism--a Force of Nature
20. Electricity--Electrostatics and Electrodynamics
21. Electronics and Nursing
22. Bioelectricity, Electrodiagnosis, and Electrotherapy

NUCLEAR PHYSICS IN NURSING
23. Atomic Structure and Nuclear Radiation
24. Quantum Physics and the Laser

FORM J-2

Course/Unit: _____

T.P.O # _____

Level of Mastery: _____

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS FOR TERMINAL PERFORMANCE OBJECTIVE

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
1. Be able to recall: Exploration of their own attitudes of pain, death and dying. Personal experiences with pain, dying and death. Cultural differences of dying. The meaning of pain. The steps of the grieving process (denial, anger, bargaining, depression, acceptance). Moral issues--life maintaining/life sustaining.	Be able to recognize that: The dying individual goes through a grieving process. Pain is a physical response to a physical or emotional problem. Dying is a process that most humans must accept. Pain is exhausting and debilitating. Death follows life. Death occurs at all ages. Guilt of family members (hesitant to reprimand/discipline). Psychological aspects.	Scientific principles: Death is a possibility for any individual at any time even in the absence of illness. Death can result from any illness or diagnostic measure and can be most readily understood than death occurring in the absence of illness. Death can be sudden. Death can be prolonged. Pain can be alleviated.	Able to determine: That all living things have a life cycle. That our culture encourages a denial of death. That the relatives require support. That nursing intervention is an appropriate role. That it is a patient's right to know that he is dying. What comfort measures to consider: physical, emotional, family involvement, spiritual. That the patient has a right to die.	Talking with the patient about death. Answering the patient's questions. Spiritual assistance. Allowing the patient to make decisions. Not avoiding the patient. Involve family. Support family. Health team conferences. Alleviation of pain. Decisions - die at home?	Did patient verbalize? Was acceptance of death evident? Reaction of family. Reaction of nursing staff. Was pain decreased or absent? Were cultural aspects respected? Were team conferences effective?

ATTACHMENT B

Curriculum Nursing 1

Course/Unit Title Homeostasis

TERMINAL LEARNING REQUIREMENTS

FORM I-2

Curriculum Analyst _____

Date _____

Terminal Performance Objectives	Criterion Statement	Criterion Measure
No. By the end of the unit, the student will be able to discuss the acid base and fluid and electrolyte balance as they relate to internal human homeostasis.	No. 100% understanding: Requirements of cells for O_2, nutrients and electrolytes; Process of maintaining dynamic equilibrium; Know how essential body functioning is maintained; Sensitivity of cells to changes in ph. How body fluids are replaced. Terms: anions, cations, diffusion, perfusion, buffer, dehydration, hyponatremia, hyperkalemia. How body replaces electrolytes.	No. Demonstrate, in writing, the following: normal blood ph; the major buffers in the circulatory systen; how acids are eliminated from the system; how bases are eliminated from the system; the major acid and base; differentiating alkalosis and acidosis; the body's compensatory mechanisms; role of hormones and cns; role of the digestive system; understanding the process of respiration; normal exchange of body fluids; normal fluid intake and loss.

ATTACHMENT C

FORM J-2

Course/Unit: _____

T.P.O # _____

Level of Mastery: _____

COGNITIVE/PSYCHOMOTOR/AFFECTIVE ANALYSIS
FOR
TERMINAL PERFORMANCE OBJECTIVE

Refer to: Taxonomies--SAFE Manual, pps. 143-46
Handouts on Taxonomies

RECALL (Memory)	COMPREHENSION (Explanation)	APPLICATION (Apply to simulated or real situation)	ANALYSIS (Break down into parts)	SYNTHESIS (Pull together elements/ solve problems)	EVALUATION (Make judgments)
Be able to recall: What is meant by acid-base balance. The meaning of ph. Body fluids by name. Meaning of homeostatis. How the ph is altered. Osmosis and diffusion. The major electrolytes, the normal values and the tissue organs involved in maintaining balance.	Recognize that: Body fluids are essential to life. Electrolyte imbalances are threats to life. Symptoms associated with imbalances are observable.	Scientific principles: How substances move in and out of body cells. Role of diet. Factors influencing retention and loss of fluid and electrolytes. The role of respiration in maintaining blood ph. The role of the kidney in maintaining blood ph.	Determine: Symptoms associated with: Electrolyte imbalance: GI Cardiac CNS Respiration Musculo-skeletal Dehydration Alterations in pO_2 Alterations in pCO_2	Study lab reports. Recognize changes in behavior. Maintenance of homeostasis.	Is able to: Interpret laboratory reports. Suspect behavior changes are due to altered electrolytes or ph.

SO, WHAT IS NURSING?

Nursing is an occupation in which one works with and cares for people. Nursing is for the person who has patience and tolerance, good judgment and reasoning, good interpersonal relationships; is capable of making decisions; accepts responsibility for his/her own actions; and has a sense of humor. Nursing is a career that brings job satisfaction to those who understand what the profession is all about before deciding to become a nurse.

If you found yourself favorably described in this questionnaire, it is highly likely that you could be a success as a registered nurse.

SO YOU WANT TO BE A REGISTERED NURSE

Wanting to be a registered nurse has been the desire of thousands of men and women before you yourself reached the same decision. Among these many individuals hoping to become licensed in the field of nursing there have been hundreds who have not succeeded. A survey in schools of nursing will show the last statement to be a fact. A survey of employers reveals that a nursing license does not make all nurses desirable employees.

No single factor has been identified as the major reason for nursing students or licensed nurses not succeeding in the career they chose. Careful examination, however, reveals a variety of reasons which contribute to failure.

Have you ever asked a nurse, a teacher or a counselor just what nursing is all about? Chances are you would get as many different answers as people you asked. Perhaps you can discover for yourself what the real world of nursing is all about. Ask yourself the following questions. They might assist you in deciding whether nursing is a career suitable to your desires and your capabilities.

1. Do I have good study habits?

   All nursing programs place great demands on the time of the student. Self-discipline, persistence and the ability to study independently are characteristics that also seem to play a major role in the study of nursing.

2. Have I taken science courses?

   While studying nursing, the student needs to use many learnings obtained in other courses such as biology, physiology and chemistry.

3. Do I like science courses?

   If you haven't enjoyed science courses to date you might be disappointed to learn that nursing is big on SCIENCE and small on art. Nursing is considered a science and an art.

4. Do I read and write with significant ease? Is my spelling not too shabby?

   Good reading and writing are a must. Nurses must not only read what doctors and others involved in treating people have written, but they

must interpret the instructions correctly. The nurse is also involved in writing; daily record keeping of all things done for each patient is a legal requirement.

5. Do I have the following mathematical skills?

   You must have basic arithmetic skills and be able to interpret word problems. You must be able to work with the metric system as well as the English system. Nurses are expected to figure drug dosages to be given in many ways including drugs given into a vein. Accuracy is a must--a life may depend upon a proper calculation.

6. Do I know that nurses must continue attending classes even after they have graduated?

   The registered nurse must attend classes, lectures, seminars, etc. in order to keep a license. It is called Continuing Education and is required by law. Proof of Continuing Education must be submitted every two years when renewing the nursing license.

7. Am I generally well-organized?

   The nurse who is a poor organizer often has difficulty in knowing what to do first. The nurse who doesn't have it all together is frankly a mess! Who suffers? The patients and the other members of the health team.

8. Do I use drugs and/or alcohol to excess? Do I have a record as a felon?

   The law is clear in this regard. The nurse can be disciplined by the Board of Nursing, including the loss of his/her license in regard to these matters.

9. Do I have any physical problems that could prevent me from securing and/or holding a job as a nurse?

   Limiting physical deformities?
   Blindness and deafness to a limiting degree?
   Color blindness?
   Obesity?
   Chronic back problem?

10. Am I perpetually tardy? Absent frequently?

    Punctuality and being dependable are traits rated very high by employers. Absenteeism has been cause for dismissal as a nursing student and also has been the reason for the loss of a job.

11. How is my safety record?

    Nurses take care of the very young, the unconscious, the aged, the incompetent, the confused and others. The nurse is responsible for the safety and welfare of all of thse patients as well as visitors to the hospital or health institution.

12. Would I describe myself as a leader or a follower?

Nurses are required to organize plans for one shift in a designated area of the hospital. The nurse makes assignments for other personnel and generally directs activities associated with taking care of the sick. Presently employers expect all registered nurses to be leaders.

13. How well do I function when I have three urgent things to do at once? Can I decide quickly which to do first or do I fall apart?

A nurse is often confronted with several urgent situations--a patient is hemorrhaging, another patient has stopped breathing, a visitor has fainted. The nurse must decide quickly which situation requires his/her attention and how the remaining situations should be handled.

14. Am I honest and ethical? How would I view the following:

1. Leaving work after seven hours and turning in eight hours on my time card?
2. Concealing the fact of an error in the treatment of a patient?
3. Revealing information about the patient to individuals not connected with the care of the patient?
4. Helping yourself to hospital supplies and food?
5. Using known contaminated materials when a situation calls for sterile supplies?

15. From what point of view do I see people?

The nurse views the patient's behavior from several angles:

1. What physical problems cause the behavior?
2. Is there an emotional problem?
3. What social and cultural factors influence a patient's behavior?

16. Do I get along with all types of people?

If you answer <u>yes</u>, <u>except</u> . . . a word of caution: the nursing world is full of <u>except</u> . . .

17. Do I accept criticism without anger? Do I consider all criticism a "put-down"? Am I able to criticize myself?

There are many things to be learned in nursing in a very short period of time. In nursing "corrections" seem to be the rule of the day, but it is by the "corrections" that the nursing student learns and grows.

18. Am I observant?

Observing patients is a major responsibility of the nurse. "Seeing" is one way of observing and perhaps the easiest. But nurses are also held accountable for using the sense of touch as well as machines to measure some things that may be happening <u>inside</u> the patient.

19. How well do I do in teaching others?

Nurses are expected to teach patients and their relatives as well as other health personnel.

20. Do I consider the last position as less than honorable? Can I tolerate to serve and serve and serve and not be served?

The world of the sick can be pictured as a totem-pole. The figure at the top is the patient. The patient never relinquishes his position in that structure--he is number 1!

The figure at the bottom of the pole? That figure represents the registered nurse; that figure's position is also permanent.

21. Do I do things well with my hands (knit, sew, work on my car), or am I always "all thumbs"?

The nursing world is full of bandages, machines, tubes and tubings that enter the body and other such things that cause the patient to be distrustful of nurses who are not gentle or are clumsy or appear not to know what they are doing.

22. To Communicate--What does that term mean?

Communication includes all our actions which send a message to another person. It is also how we ourselves read a message being sent to us. In our experiences we have received messages by the spoken or written word, by a smile, a shrug of the shoulders, a wrinkle of the nose, crying, gestures, etc. The list seems endless. In the world of the patient, the nurse cannot depend solely on the spoken word or the usual non-verbal clues.

How does it differ in the world of the sick? A few examples . . .

1. An unconscious patient moans--what does it mean?
2. A baby cries--is it hurting? hungry? angry? does it have a brain injury?
3. A patient has perspiration across the forehead--does he perspire easily? is he in pain? under stress?
4. A patient sighs frequently--tired? bored? not enough oxygen to the brain?

23. What is my definition of cleanliness?

The nurse is always alert to cleanliness in several ways. One is soil--that which we can see. The other is bacteria, invisible to the eye. The nurse needs to understand the nature of germs which constantly pose a threat to patient, employees and others.

24. How do I react physically to the various wastes of the human body? What might be my reaction to having to cleanse and bathe patients who are soiled by body wastes?

25. Am I considering nursing because:

    It is a people service? For the pay? Or solely for status?

26. Do I consider nursing as a five-day week, Monday through Friday position? What will be my reaction if my employer asks me to work 3 p.m. to 11 p.m. or 11 p.m. to 7 a.m.? To work Christmas or other holidays? To work on my birthday?

27. Do I accept responsibility for my own actions?

    In nursing the law holds you responsible for what you have done or should have done.

23. How am I at making judgments? Do my parents or others frequently remark that I "just don't think" or "use my head"?

29. Do I consider myself capable of putting out as much as the next person at work?

    Employers often evaluate a nurse on whether assignments are completed in an expected length of time.

30. Am I curious about the <u>how</u> and <u>why</u> of things?

    Nurses are required to not only know how to do things but must understand <u>why</u> it is being done. In addition, the nurse must know both the expected good outcome of a treatment or action and the possible harm that could result.

31. Do I accept rules as necessary guides?

    Rules in the health field are designed to protect the welfare and safety of patients, visitors and employees. Employers expect nurses to abide by guidelines set by government agencies and by the "rules" the employer sets down for running a business. (Taking care of the sick is a big business.)

A REGISTERED NURSING CAREER

Hey, sisters and brothers (yes, brothers too), do you want to give some meaningful service to the community through an exciting career? Have you thought of being a registered nurse? You can do it. Check out the following information.

TO QUALIFY AS A REGISTERED NURSE:

1. You must be willing to work with the sick, the infirm, and the general medical staff. Your attitude must be positive, both with patients and medical staff.

2. You must complete a course of study as outlined by the Board of Nursing.

3. You must pass the California licensing examination given by the Board of Nursing.

4. You should be in good physical health with no back ailments or any other disabilities. Many employers of nurses have strict weight requirements.

AS A REGISTERED NURSE:

1. You will supervise and train other nursing personnel, and also give guidance to patients in health and safety.

2. You will be expected to read doctors' orders, etc. accurately and write legibly in the medical charts, and safely administer medicines and perform treatments as ordered by the doctor.

3. You must pay strict attention to all rules of safety, health standards, and bed care.

4. You must have basic arithmetic skills and be able to interpret word problems.

5. You will be expected to be clean and neat at all times, as well as prompt.

6. You must be observant enough to detect symptoms, illness, reaction to treatment, behavioral and general physical condition of patients.

7. You cannot have a history of drug abuse (alcohol included) or a criminal record.

8. You will be required by law to continue schooling even after graduation in order to keep your license.